200000104863 TRANSMITTAL LETTER -TERED PH 1: 04 Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314 CODY'S TRANS PORT INC. PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) SUBJECT: 70000345644 -11/07/00=01143 ---9 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$78.75 \$70.00 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: <u>Chris</u> STAThas Name (Printed or typed) 430 GOLDEN ISLES # 504 Address HALLANDALE FL 33009 City, State & Zip 954 658-4226 Daytime Telephone number F. CHESSER NOV 8 2000

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: CODY'S TRANSPORT INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

430 GOLDEN ISLES HALLANDALE FL. 33009

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is:

CARTAGE TRANSPORT

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es):

JANICE GREER 430 GOLDEN ISLES # 504 HALLANDALE FL 33009

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ChRIS STATHAS 430 GOLDEN ISLES #504 HALLANDALE FL. 33009 ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Chris STATHAS 430 GOLDEN ISLES # 504 HALLAN DALE FL 33009

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

JO NOV -7 PM 1:

FILED

<u>10/26/00</u> Date <u>10/26/00</u>