TRANSMITTAL LETTER 010000 35326 Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 DOOរាវទ *****78.75 ****78.75 5 TRUCK ACCESSORIES INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) SUBJECT: Enclosed is an original and one(1) copy of the articles of incorporation and a check for : **\$87.50 \$78.75 3** \$78.75 \$70.00 Filing Fee Filing Fee, Filing Fee Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED ion J. Su FROM: Name (Printed or typed) Address TALLAHasse Fl. 32301 City. State & 7in 850 - 656 - 1919 Daytime Telephone number

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: M35 TRUCK Accesso Ries inc. 641 FRANKS FAIRLONE PERRY FI. 32348 <u>ARTICLE III PURPOSE</u> The purpose for which the corporation is organized is: To Be TRAINING, Technical, and palucational consultants for Buisnesser who sell Truckard auto Accesso nie sas well as wholesale <u>ARTICLE IV</u> SHARES Truck Accessory Distributor. The number of shares of starking The number of shares of stock is 160 ARTICLE V INITIAL OFFICERS (DIRECTORS (optional) APR -3 PM 1: The name(s) and address(es): FILED ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Mitre Minul 200 N Maquelie DA Tollothesse Fl. 32301 INCORPORATOR ICLE VII william J. Sullivin I The name and address of the Incorporator is: 200 N magnotion DR Tallattasse Fl. 32301 ***** ***** 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 $\frac{5-27-\epsilon}{\text{Date}}$ Signature/Registered Agent

JAT SIL -

Signature/Incorporator

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3-27-01

Date