CAVITON ThoMAS Requester's Name	AFPHOVED' AND FILED
3045, Orange BLOSSOM Address ORLANDOFL. 32805-407-64 City/State/Zip Phone #	SECRETARY OF OTHER
CORPORATION NAME(S) & DOCU	- Office Ose-Only
. .	OF CENTRAL FLORIDA INC. (Document #)
2. (Corporation Name)	(Document #)
3. (Corporation Name) 4.	(Document #) 500004474785
(Corporation Name)	-07/13/0101081001 ******78.75 ******78.75
☑ Walk in ☐ Pick up time _	Certified Copy
☐ Mail out ☐ Will wait	Photocopy
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other
CR2E031(7/97)	Examiner's Initials

A71/13W



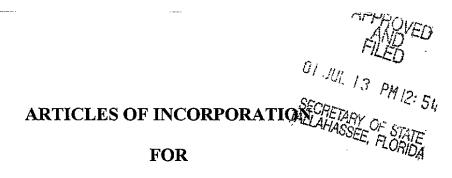
JULY 11, 2001

DEPARTMENT OF CORPORATIONS PO BOX 6237 TALLAHASSEE, FL 32310

Dear Sir / Madam:

Attached And Enclosed Are Articles Of Incorporations For EDNARD TRUCKING OF CENTRAL FLORIDA INC. and The Filing Fee And Two Copies. Please Execute These Documents And Return A Copy To Me. The name of the Registered Agent And The Address Of the Registered Office Is MARLYNE DESIR, 3278 FAIRHAVEN AVENUE Kissimmee Florida Whose address 3278 FAIRHAVEN AVENUE Kissimmee Fl. 34746.

NARLYNE P. DESIR



EDNARD TRUCKING OF CENTRAL FLORIDA INC.

ARTICLE ONE

THE NAME OF THE CORPORATION IS: EDNARD TRUCKING OF CENTRAL FLORIDA INC.

ARTICLE TWO

THE PERIOD, TERM AND DURATION IS PERPETUAL.

ARTICLE THREE

THIS BUSINESS, IF GRANTED CORPORATE STATUS WILL COMMENCE ITS' BUSINESS AS A FULL SERVICE TRUCKING COMPANY, WHEREIN, WE WILL PROVIDE TRUCKING, HAULING, MOVING TRANSPORTING AND ANY OTHER RELATED SERVICES AS PROVIDED FOR BY STATUE. ALL OF THE COMPANY'S BUSINESS WILL BE CONDUCTED UNDER THE NAME OF EDNARD TRUCKING OF CENTRAL FLORIDA INC.

ARTICLE FOUR

THE AGGREGATE NUMBER OF SHARES BY WHICH ENHANCED EDNARD TRUCKING OF CENTRAL FLORIDA INC SHALL HAVE THE AUTHORITY TO ISSUE WILL BE 2,000 SHARES. EACH SHARE SHALL HAVE A PAR VALUE ON ONE DOLLAR EACH.

ARTICLE FIVE

THE CORPORATION WILL NOT COMMENCE ANY OF ITS' BUSINESS UNTIL SUCH TIME AS IT HAS RECEIVED FOR THE ISSUANCE OF SHARES AN AMOUNT IN CONSIDERATION OF THE VALUE OF TWO THOUSAND DOLLARS.

ARTICLE SIX

THE STREET ADDRESS OF ITS' INITIAL REGISTERED OFFICE IS 3278 FAIRHAVEN AVENUE, KISSIMMEE, FLORIDA 34746, THE NAME OF THE REGISTERED AGENT IS NARLYNE DESIR WHOSE ADDRESS IS 3278 FAIRHAVEN AVENUE KISSIMMEE, FLORIDA ZIP CODE NUMBER 34746. THE PRINCIPAL PLACE OF BUSINESS IS THE SAME AS THE REGISTERED OFFICE, WHICH IS 3278 FAIRHAVEN AVENUE KISSIMMEE FLORIDA 34746.

ARTICLE SEVEN

THE NUMBER OF DIRECTORS WHICH SHALL CONSTITUTE THE BOARD DIRECTORS ARE TWO. THE NAME AND ADDRESS OF THE PERSONS WHICH WILL SERVE AS DIRECTORS ARE AS FOLLOWS:

NAME

ADDRESS

EDDY DESIR PRESIDENT

3278 FAIRHAVEN AVENUE KISSIMMEE FL. 34746

NARLYNE P DESIR DIRECTOR

3278 FAIRHAVEN AVENUE KISSIMMEE FL. 34746

ARTICLE EIGHT

THE BOARD OF DIRECTORS SHALL HAVE THE POWER AND THE RIGHT TO DEVELOP, SET, AND OR MODIFY ITS BY-LAWS WITHOUT RESTRICTIONS OF THEIR POWERS AS CONFERRED BY STATUE.

ARTICLE NINE

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

CARLTON THOMAS 304 SOUTH O.B.T. ORLANDO, FL 32805

THE DUTIES AND POWERS OF THE INCORPORATOR SHALL CEASE ONCE THE BUSINESS IS GRANTED FULL CORPORATE STATUS.



PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF FLORIDA SUMMITS THE FOLLOWING STATEMENTS IN DESIGNATING THE REGISTERED OFFICER/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS:

EDNARD TRUCKING OF CENTRAL FLORIDA INC.

THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

(NAME)

NARLYNE DESIR (PO BOXES NOT ACCEPTABLE) 3278 FAIRHAVEN AVE. (CITY/STATE/ZIP) KISSIMMEE FLORIAD 34746

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNED IN THIS CERTIFICATE. I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISION OF ALL STATUES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY DESIGNATION AS REGISTERED AGENT.

Maryon J. Desir SIGNATURE

DATE

1/11/01