

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

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From:

Account Name : DAVID TORCHIN, C.P.A., P.A.

Account Number : I19990000007

Phone : (954)472-3124

Fax Number : (954)472-0067

FLORIDA PROFIT CORPORATION OR P.A.

Statewide Van Lines, Inc.

Certificate of Status	1
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Page Count	03
Estimated Charge	\$78.75

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FAX AUDIT NUMBER:

ARTICLES OF INCORPORATION

Statewide Van Lines, Inc.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Statewide Van Lines, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Principal Place of Business:

Mailing Address:

3615 NE 207th Street, #2214

Aventura, FL 33180

3615 NE 207th Street, #2214

Aventura, FL 33180

Phone Number: 305-931-2152

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Thousand Shares (1000.) at One Dollar (\$1.00) par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

David Torchin, C.P.A., P.A. 8211 West Broward Blvd., Suite 200 Plantation, FL 33324-2726

> Prepared By: David Torchin, C.P.A., P.A. 8211 West Broward Blvd., Suite 200 Plantation, FL 33324-2726 Phone: (954) 472-3124 Fax: (954) 472-0067

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ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporators to these Articles of incorporation and the office each shall hold is(are):

President Reuven Shmueli 3615 NE 207th Street, #2214 Aventura, FL 33180

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 04 October,2001.

day of

10/04/01

Date

Signature

FAX AUDIT NUMBER: 40100010570)6

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

Statewide Van Lines, Inc.

2. The name and address of the registered agent and office is:

David Torchin, C.P.A., P.A. 8211 West Broward Blvd., Suite 200 Plantation, FL 33324-2726 FILED

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SECRETARY OF STATE
-SECRETARY F. FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED 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 PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature

10/04/01

Date

Prepared By: David Torchin, C.P.A., P.A. 8211 West Broward Blvd., Suite 200 Plantation, FL 33324-2726 Phone: (954) 472-3124 Fax: (954) 472-0067

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