TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

U/	NÛV	-8	PH	3:	0.5
TÄLI	CRETA LAHAS	ARY SSEE,	Or s FLC	TA] Dair	E

SUBJECT:	<u>D.</u>	Swa HS (PROPOSED CORE	Hawling PORATE NAME - MUS	エハC. ST INCLUDE SUFFIX)	
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Enclosed	l is an origina	l and one(1) copy of the article	s of incorporation and a	CHECK IOI.	
	□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certifieate of Status PY REQUIRED	RECE
	FROM:	Derrick Swa Name (Pr	rinted or typed) Address	8 PM 3: 00 CUPORATURS EE, FLORIDA	
		Havanna Fla	½. 32333 State & Zip	· -	
	229	-416 - 5559 Daytime T	'elephone number	, - ,	
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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)	AFPROVED
ARTICLE I NAME The name of the corporation shall be:	FILED
D. Swatts Hauling IR.	01 NOV -8 PM 3: 04 SECRETARY OF STATE
ARTICLE II PRINCIPAL OFFICE	TALLAHASSEE, FLORIDA
The principal place of business/mailing address is: 55 Hinson Circle	-
thuanna, 7k. 32333	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
ARTICLE IV SHARES	
The number of shares of stock is: 5	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional The name(s) and address(es):	<u>.1)</u>
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Derrick Swatts 55. Hinson Cir	t in the second of the second
Havanna, 7/2. 32333	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Decick Supples	
55. Hinson Cir. Hauanna, 7/a. 32333 *********************************	*********
**************************************	stated corporation at the place designated in this
Signature/Registered Agent	Date / /
Sunt	11/08/01
Signature/Incorporator	Date