P02000025413

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

400005040494---2 -03/04/02--01058--004 *****87.50 *****87.50

SUBJECT: Restatyans INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
		• • • • • • • • • • • • • • • • • • • •			
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:		
□ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM:	Hector M i	Resto (Printed or typed)		0. 1	S
-	13001 Prairie Meadows DR			02 NAR -4	CRETARY
-	ORLando FL 32837 City, State & Zip				E STA
ORLando FL 32837 City, State & Zip 407 - 812 - 4770					

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

Daytime Telephone number

100 M/B - h PH 2: 24

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:

RESTOTRANS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

RESTOTRANS INC.

PO BOX 2132

ORLANDO FL 32877-2132

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRUCKING AND TRANSPORTATION

ARTICLE IV SHARES

The number of shares of stock is:

0ne

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

HECTOR M RESTO 13001 PRAIRIE MEADOWS DR ORLANDO FL 32837

OWNER

ARTICLE VI REGISTERED AGENT

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

HECTOR M RESTO 13001 PRAIRIE MEADOWS DR ORLANDO FL 32837

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HECTOR M RESTO 13001 PRAIRIE MEADOWS DR ORLANDO FL 32837

Signature/Registered Agent

Signature/Incorporator

Date

Date