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Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839

Fax Number : (305)716-0346

R 26 AM 9: 14
TARY OF STATE
HASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A. BEST LINE OF TRANSPORT CORP.

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02 APR 26 AM 9: I

SECRETARY OF STATE
TALLAHASSEE, FLORID

ARTICLE OF INCORPORATION

<u>of</u>

BEST LINE OF TRANSPORT CORP.

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

ARTICLE I NAME

The name of the corporation shall be: BEST LINE OF TRANSPORT CORP.

The principal place of business of this corporation shall be: 501 NW. 36 CT.
Miami,F1.33125

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: $100 \times 10.00 = 1.000.00$

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

ALEXIS ROMERO

DIRECTOR

501 NW. 36 Ct.

Miami, F1.33125

DIRECTOR

TLEANA TELLEZ 501 NW. 36 Ct.

Miami, F1.33125

ARTICLE VI INCORPORATOR (S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

ALEXIS ROMERO

PRESIDENT & TREASURER (50 shares)

501 NW. 36 CT.

Miami, Fl. 33125

ILEANA TELLEZ

VICE-PRESIDENT & SECRETARY (50 shares)

501 NW. 36 Ct.

Miami,F1.33125

The undersigned has(have) executed these Article of Incorporation this __25 th. day of _April _____,658 2002 .

Signature/Title

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION 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:		
2.	The name and address of the registered agent and office is	<u>:</u>	
	501 NW. 36 CT. (P. O. BOX NOT ACCEPTABLE) AND HOPEDA 33125	02 APR 26	
	(CITY/STATE/ZIP)	M 9: 1	
OF AS TH RE	VING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DES REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FULL BE AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES LATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES DI AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY OSITION AS MY POSITION AS REGISTERED AGENT.	IR.	
	SIGNATURE		<u>.</u> .
	DATE04-25-02		

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