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SECRETARY OF STATE FALLAHASSEE FLORIDA

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

300005599213--2 -05/23/02--01024--007 *****70.00 *****70.00

SUBJECT: Agape Trucking Industry, Incorporated (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
Enclosed is an origina	al and one(1) copy of the articles	of incorporation and a	check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Edward F. Smit	h	
i Kowi.	Name (Printed or typed)		
	5472 Cinderland Parkway		
	Address		
	Orlando, Florida 32808		
	City, State & Zip		
	(407) 616-3185		·
Daytime Telephone number			

)

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)

ARTICLE I NAME

The name of the corporation shall be:

FILED

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Agape Trucking Industry, Incorporation

SECRETARY OF STATE TALLAHASSEE FLORIDA

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

5472 Cinderlane Parkway Orlando, Florida 32808

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

To provide professional carrier services for local and nationwide businesses.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares at \$1.00 per share

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Edward F. Smith 5472 Cinderlane Parkway Orlando, FL 32808

REGISTERED AGENT

The name and Florida street address registered agent is:

Edward F. Smith 5472 Cinderlane Parkway Orlando, Florida 32808

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Edward F. Smith 5472 Cinderlane Parkway Orlando, Florida 32808

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date Date