Po200088251

TRANSMITTAL LETTER

LIGHTNIN TRANSPORT, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFDX)

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

SUBJECT:

100007054171--8 -08/12/02--01064--007 *****70.00 ******70.00

Enclosed are an original section of the section of	inal and one (1) copy of the art U \$78.75 Filing Fee & Certificate of Status	icles of incorporation and \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	U \$87.50 Filing Fee, Certified Cop & Certificate Status	of		
FROM:	Barry H. Pitts					
	Name (Printed or typed) 6751 Applewood Dr.			SLUR	2002 AUG	
-	Address				UG 12	
	Zephyrhills, Fl. City, State & Zip			EF. FLO	1	
		813-907-9335		AGIRC 31.V.	9.09	

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

Daytime Telephone number

08-15-07

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:

LIGHTNIN TRANSPORT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6751 Applewood Dr. Zephyrhills, Fl. 33544

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is hereby organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

The corporation is authorized to issue 100 shares of Common Stock which shall be designated "Common Shares".

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ARTICLE VI REGISTERED AGENT

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

CAROL D. Pills 6751 Applewood Dr. Zephyrhills, Fl. 33544

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barry H. Pitts, President and Directo 6751 Applewood Dr. Zephyrhilis, Fl. 33544

Having been named as registered agent to accept service of process for ti	ne above stated corporation at the place des
certificate. I am familiar with and accept the appointment as registered as	ent and agree to act in this capacity
and O Potts	8-8-07

Signature/Registered Agent

Signature/Incorporator

8-8-02 Date

8-8-02

Date

2002 AUG 12 AM 9: 09