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DEFINITION OF STATE
DIVISION OF CORPORATIONS
TALL THASSEE FLORIDA

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OFFICE USE ONLY(DOCUMENT #)			,	
LAZARUS CORPORATE FILIN	G SERVICE			
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CORPORATION NAME(s) & DO	CUMENT NUMI	BER(S) (if known):	:	****
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NEW FILINGS	AMENDME	STY		
Profit	Amendment			
NonProfit	Resignation of R.	A., Officer/Director		
. Limited Liability	Change of Registered Agent			
Domestication	Dissolution/Withdrawal			
Other	Merger			
OTHER FILINGS  Annual Report  Fictitious Name  Name Reservation	REGISTRATION QUALIFICATION Foreign Limited Partnersh Reinstatement			
	Trademark			
	Other	Exa	miner's Initials	

## ARTICLES OF INCORPORATION

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

ARTICLE L - NAME

The name of the corporation shall be:

NANIN Trucking Coop.

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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

#### ARTICLE IL - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

1290 W 70 ST Hideah IL

### ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

### ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

IBOUS DOBRESC. 1298 W 78 ST Hicloch IN 33014.

#### ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of	
Incorporation is:	
IDAINS NODARSE.	

15 40 00 18 St Hictory Er 33011

The undersigned incorporator has executed these Articles of Incorporation this 31 day of 5003.

Signature

#### **ARTICLE VI- DIRECTOR(S)**

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

Tologs vodanse (President).

Hidech FL 35014

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

CRETARY OF STATE