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## TRANSMITTAL LETTER

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

UBJECT:	PROFAX	LNTERN TE NAME - MUST INCL	ATIONATION AT	
	(FROFOSED CORTORA)	ie name – <u>moot moe</u>	<u>ODU OOLI MO</u>	
Inclosed is an origin	al and one(1) copy of the article	es of incorporation and a		[
\$70.00	\$78.75	<b>□</b> \$78.75	\$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy	i
			& Certificate of	
		ADDITIONAL CO	Status OPY REQUIRED	
FROM	STANLEY Name (P	B. 1772	PORE	
	5820 N		TREET U	INIT G
	SUNRISE City,	FL 33	313	
	(954) 5	83-37	′3 <i>0</i>	

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) <u>ARTICLE I</u> NAME The name of the corporation shall be: ROFAX INTERNATIONAL CORP. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 5820 NW12 STREET, UNIT G SUNRISE, FLORIDA 33313 The purpose for which the corporation is organized is: TRUCKING AND TRANSPORTATION <u>ARTICLE IV SHARES</u> The number of shares of stock is: The name(s) and address(es): STANLEY B. MOORE REGISTERED AGENT The name and Florida street address of the registered agent is: MANNING-BROWN 441 SW 22 TERRACE FT. LAUDERDALE FLORIDA 33312. ARTICLE VII INCORPORATOR The name and address of the Incorporator is: STANLEY B MOORE 5820 NW 12 STREET, UNIT G Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. Lam famillar with and queept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent