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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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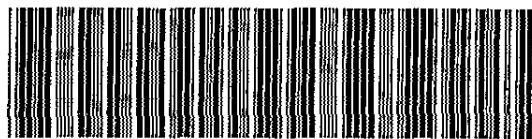
(Business Entity Name)

(Document Number)

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03 DEC 31 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sean Vallee
4105 N. Florida Ave.
Tampa, FL 33603

December 29, 2002

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

RE: Articles of Incorporation

Dear Sirs or Madams:

Please find the enclosed articles of organization for **Transport PC USA, Inc.**
I also enclosed my money order for \$ 87.50 for the filing fee. Please process as soon as possible.

Sincerely,



Sandra Perez

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be: **TRANSPORT PC USA INC.**

ARTICLE II PRINCIPAL OFFICE

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

Business:
**28933 Long Meadow Loop
Wesley Chapel, Florida 33543**

Mailing:
**28933 Long Meadow Loop
Wesley Chapel, Florida 33543**

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

**Sandra Perez
28933 Long Meadow Loop
Wesley Chapel, Florida 33543**

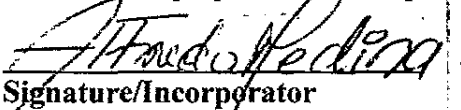
ARTICLE V INCORPORATOR

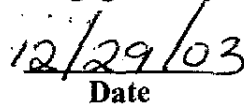
The name and address of the incorporator to these Articles of Incorporation are:

**Alfredo Medina
28933 Long Meadow Loop
Wesley Chapel, Florida 33543**

ARTICLE VI PURPOSE

The business purpose of this corporation is: **To engage in any lawful business.**


Signature/Incorporator


Date

Having been named as registered agent and to accept service of process for the above stated corporation, 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 relating to the proper and complete performance of my duties, and I am familiar and accept the obligations of my position as registered agent.


Signature/Registered Agent


Date

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STATE OF FLORIDA
TALLAHASSEE