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DIVISION OF SURPORATIONS

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## TRANSMITTAL LETTER

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

Enclosed are an orig	inal and one (1) copy of the artic	les 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	Filing Fee, Certified Copy & Certificate of Status PY REOUIRED	
FROM: MARLON ANDERSON Name (Printed or typed)				
	16475 5W 28# 5 12881			
-		L 33027	<u></u>	
-	954-447-437  Daytime Telephone number			

SUBJECT: MSR IRUCKING USA INC (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

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: MSR TEUCKING USA INC ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 16475 SW Z8 F SINEET MIRAMAR FL 3307.7 ARTICLE III PURPOSE The purpose for which the corporation is organized is: CONDUCTION BUSINESS IN FLORIDA ARTICLE IV SHARES The number of shares of stock is: 200 PAR VALUE ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): PATRICE ANDERSON: SECRETARY MARLON ANDERSON: PRESIDENT TREASURER ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: MARLON ANDERSON 16475 SW ZAKST MIRAMAR FL 33027 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: MARLON ANDERSON 16475 SW ZKES MEET Mila Mak 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 pnd accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator