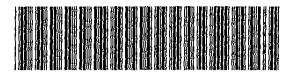
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# TRANSMITTAL LETTER

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

JBJECT:	Stitch Towing, Inc. (PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
	•		
closed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy
		ADDITIONAL CO	& Certificate of Status  PPY REQUIRED
FROM:	Stitch Towing, Inc.		
PROM.	Name	(Printed or typed)	
	13358 Lejeune Road		· 
•	A	Address	
	Opalocka, FL 33054		
•	City,	State & Zip	
_	305-300-9766		
	Daytime T	elephone number	

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:

Stitch Towing, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 13358 Lejeune Road

13358 Lejeune Road Opalocka, FL 33054

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Towing

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Miguel A. Ibarra, President Miguel A. Ibarra, Secretary

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Rosa M. Consuegra 10501 NW 30 Avenue Miami, FL 33147

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Miguel A. Ibarra 13358 Lejeune Road Opalocka, FL 33054

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 and accept the appointment as registered agent and agree to act in this capacity

A Coxulgra

Signature/Registered Agent

10/19/04

Date

Signature/Incorporato

10/19/04 Date