P04000/64252

(Requestor's Name)				
(Address)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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TRANSMITTAL LETTER

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

SUBJECT:	T-Cat 1	nc:	N. P. CTIMENTA	
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Thomas	C FRUF	DJR.	
	2308 k	Wood lawr Address 33		
City, State & Zip (813) 363-9242 Daytime Telephone number				

NOTE: Please provide the original and one copy of the articles.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: T-CA+ Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2308 W Wood lawn Ave Tampe F1 336 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Trucking ARTICLE IV SHARES The number of shares of stock is: 1000 INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Thomas C ARNAO, It 2308 w woodlawn Are President/Owner Tampa 71 33607 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: CARNAO Jr Thomas 2308 W Woodlawn Are ARTICLE VII \ INCORPORATOR The name and address of the Incorporator is: Wood lawn Ave Thomas 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

ARTICLES OF INCORPORATION

Signature/Incorporator