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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 205-0381

From: Account Name : LAXMY'S CARRIER SERVICES  
Account Number : I20040000007  
Phone : (305) 640-0281  
Fax Number : (305) 640-0282

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.  
MAKO TRANSPORTATION, INC.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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**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:

MAKO TRANSPORTATION, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

4506 NW 185 ST  
MIAMI, FL 33055

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TRANSPORTATION

**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):

LUIS A. MARRERO  
4506 NW 185 ST  
MIAMI, FL 33055

**ARTICLE VI REGISTERED AGENT**

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


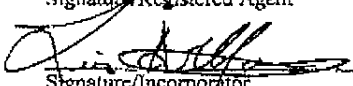
LAXMY'S CARRIER SEVICES  
8181 NW 36 ST STE 14C  
MIAMI, FLORIDA 33166

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

LUIS A. MARRERO  
4506 NW 185 ST  
MIAMI, FL 33055

\*\*\*\*\*  
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.

  
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
03/11/2005  
Date  
\_\_\_\_\_  
03/11/2005  
Date

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