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(Re	equestor's Name)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

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C.J.4

TRANSMITTAL LETTER

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

SUBJECT:	Trans-Caribe Distribution			
•	(PROPOSED CORPOR	ATE NAME <u>– MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy		
		ADDITIONAL CO	DPY REQUIRED	
FROM:		ga e (Printed or typed)		
-	P.O. Box 1011	55 Address		
-		rida 32910-1155 , State & Zip		
-	321-722-1897 Daytime	Telephone 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:

Trans-Caribe Distribution INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: P.O. Box 101155
Palm bay, FL 32910-1155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Start a distribution company to import and export products from the Caribbean Islands

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):

Raymond Vega Ron Foreman

ARTICLE VI REGISTERED AGENT

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

Anna Vega 152 Bayamo Ave. Palm Bay, FL 32907

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Raymond Vega 152 Bayamo Ave. NE Palm Bay, FL 32907

Signature/Incorporator

4/ 12/05

Date