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Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

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NORTHERN LOGISTICS EXPRESS, INC

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 5, 2005

FAS-T CORP AGENTS INC

SUBJECT: NORTHERN LOGISTICS EXPRESS, INC.

REF: W05000022816

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ARTICLES OF INCORPORATION

OF

Northern Logistics Express, Inc

OS W -5 M 9: 59
SECRETARY OF STATE
SECRETARY OF STATE
TALL MASSEE, FLORIDA

The Undersigned incorporator, for the purpose of forming a Corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I NAME

The name of the Corporation shall be:

Northern Logistics Express, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

4310 SW 15 Street Miami, Fl 33134

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any time and the Distribution is as follow:

200 SHARES

1.00 Each

Patricia C Torres

200 SHARES

ARTICLE IV INCORPORATORS

The name and street address of the incorporators to these Articles of Incorporation is as follow:

Patricia C. Torres 4310 SW 15 Street Miami Fl 33134

The undersigned have executed these Articles of Incorporation this 4 Days of May 2005

PRESIDENT/INCORPORATOR

Patricia C Torres

ARTICLE V BUSINESS ACTIVITY

The Company will participate in all legally Business Activity.

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statues, the Undersigned Corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

Northern Logistics Express, Inc.

The Name and Address of the registered agent and office is:

Patricia C. Torres 4310 SW 15 Street Miami Fl 33134

HAVING BEEN NAMED AS REGISTERED AGENT AND TO SERVICE OF PROCEDURE FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREED TO ACT IN THIS CAPACITY. TO THE PROPER AND COMPLETE PERFORMANCE OF DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERD AGENT.