P060000 94485

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
AUTHORIZATION BY PHONE TO CORRECT ATTICLES I TITY VIII				
DATE 7//7/06 DOC. EXAM/N/PD				

Office Use Only

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MR)18

COVER LETTER

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

SUBJECT: LMP	Transportation Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
			□ non so
\$70.00	₹78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
			Status
		ADDITIONAL CO	
/	onelia orniela Siew		
FROM: G	orniela Siew		
PROM.	Name	(Printed or typed)	
	7765 Lake Worth Roa	d #302	
,		Address	
	Lake Worth, Florida 33	467	
•		State & Zip	14
;	561-601-8205		
	Daytime 1	elephone number	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 21, 2006

CORNIELA SHAW 7765 LAKE WORTH ROAD #302 LAKE WORTH, FL 33467

SUBJECT: LMP TRANSPORTATION

Ref. Number: W06000028096

We have received your document for LMP TRANSPORTATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

List the name of the registered agent in Article VI and list the address for the incorporator in Article VII.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist New Filing Section

Letter Number: 106A00041541

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DE PARTHENT OF STATE
DIVISION OF CORPORATIONS
TAILANASSEE FI OPICA

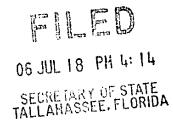
ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

LMP Transportation Inc.



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7765 Lake Worth Road #302 Lake Worth, Florida 33467

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Vehicle 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):

Cornelia Siew - President

ARTICLE VI REGISTERED AGENT

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

7765 Lake Worth Road #302 Lake Worth, Florida 33467 Cornelia Siew

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Cornelia Siew

7765 Lake Worth Road #302 Lake Worth, Florida 33467

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/Registered Agent

Date

5/23/06

Date

5/23/06

Date