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(Requestor's Name)				
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(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
Certified Copies Certificates of Status				
Cassial Lastration A. Ellin Office				
Special Instructions to Filing Officer:				
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CRETARY OF STATE
TALLAHASSEE, FLORID

Office Use Only

COVER LETTER

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

SUBJECT: GROOVIN EXPRESS INC				
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	a check for:	
X \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COF	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: PHILIP J. FOY JR Name (Printed or typed)				
1433 SE PORTILLO ROAD				
Address				
PORT SAINT LUCIE, FL. 34954				
City, State & Zip				
954-553-4437				
Daytime Telephone number				

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

GROOVIN EXPRESS INC

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:

GROOVIN EXPRESS INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1433 SE PORTILLO ROAD

PORT SAINT LUCIE, FL 34954

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRUCKING BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PHILIP J. FOY JR 1433 SE PORTILLO ROAD PORT SAINT LUCIE, FL 34954

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: PHILIP J. FOY JR
1433 SE PORTILLO ROAD
PORT SAINT LUCIE, FL 34954

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: PHILIP J. FOY JR
1433 SE PORTILLO ROAD
PORT SAINT LUCIE. FL 34954

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 familian with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

7/2//06

7/2//06 Date

JECRE (ARY OF STATE ALLAHASSEE, FLORID