P06000098206

(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 INTUINE TO DATE 7/27/00 DOG. EXAM 01/85				

Office Use Only



800076425418

07/05/06--01040--010 **78.75

SECRETARY OF STATE

medan

COVER LETTER

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

SUBJECT: SIN	artransport, Inc.	Mojo Risin Ente	rprises, Inc.
Mon	PROPOSED CORPORA	TENAME - MUST INCL (C.,	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	icles 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM:	Chris McKay Name	(Printed or typed)	
	7008 Willoughly	Lane Address	
	Orlando, FL 32812		
	City,	State & Zip	
	321-663-5565	elephone number	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 6, 2006

CHRIS MCKAY 7008 WILLOUGHLY LANE ORLANDO, FL 32812

SUBJECT: SMARTRANSPORT, INC.

Ref. Number: W06000030134

We have received your document for SMARTRANSPORT, INC. 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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: 906A00043810

RECEIVED

06 JUL 17 FM 4: 16

DEPARIMENT OF STATE
DIVISION OF CORPORATIONS
TALLAMASSEE, FLORING

ARTICLES OF INCORPORATION

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

06 JUL 27 AM 10: 46

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Mojo Risin Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 7008 Willoughly Lane Orlando, FL 32812

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Start New Business

ARTICLE IV SHARES

The number of shares of stock is:

500 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Chris McKay

Rick Scott 7008 Willoughly Lane Orlando, FL 32812 Vice President

President

mt Dora, FL32757

655 Camelia St

ARTICLE VI <u>REGISTERED AGENT</u>

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

Chris McKay 7008 Willoughly Lane Orlando, FL 32812

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Chris McKay 7008 Willoughly Lane Orlando, FL 32812

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

Date

6.29.06

Signature/Incorporator

Date