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CORPORATE FILING SERVICE	
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CORPORATION NAME(S) & DOCUMENT NUM	BER(S), (if known):
1. P. SUAREZ TRUCKING	Document #)
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4.	Document #)
(Corporation Name) Walk in Pick up time	Certified Copy Copy Certificate of Status
Profit	endment signation of R.A., Officer/Director ange of Registered Agent solution/Withdrawal
OTHER FILINGS Annual Report Fictitious Name REGIS For Lin Rei	TRATION/QUALIFICATION eign nited Partnership instatement idemark
	Examiner's Initials

CR2E031(7/97)

ARTICLES OF INCORPORATION

FILED
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The undersigned Incorporator(s), for the purpose of forming a CALLAHASSEE, FLORIDA corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

A. SUAREZ TRUCKING CORP.

ARTICLE II - PRINCIPAL OFFICE

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

9103 SW 37 TERR. Minni FZ 33165

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ABEL SUAREZ

9703 SW 31 TERR. MAMI FL 33165

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

1788/ SURREZ 9703 SW 37 TEER MANN FI 33165

Signature

ARTICLE VI DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

ABEL SUAREZ- MESIDENT

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature