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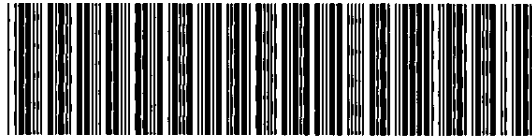
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

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**LAZARUS
CORPORATE FILING SERVICE**

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. MAGICAL AUTO TRANSPORT, INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 4, 2007

LAZARUS

SUBJECT: MAGICAL AUTO TRANSPORT, INC.
Ref. Number: W07000016497

We have received your document for MAGICAL AUTO TRANSPORT, 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):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

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) 245-6962.

Valerie Herring
Document Specialist
New Filing Section

Letter Number: 307A00022868

ARTICLES OF INCORPORATION
OF
MAGICAL AUTO TRANSPORT, INC

FILED
07 APR -5 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned subscriber who is of legal age and competent to contract, for the purpose of forming a corporation under the laws of the State of Florida, hereby adopts and acknowledges the following Articles of Incorporation for this Corporation:

ARTICLE I

The name of this Corporation shall be:

Magical Auto Transport, Inc

The principal address of this Corporation shall be:

3066 Natoma Way

Orlando, Florida 32825

ARTICLE II

The general nature of this business and the objects and purposes proposed to be transacted and carried on is auto transportation services to the same extent as natural persons might or could do and specifically the Corporation may engage in any activity or business permitted under the laws of the United States and/or the State of Florida.

ARTICLE III

The capital stock authorized the par value thereof, and the characteristics of such stock shall be as follows: \$1.00 par value, 100 shares authorized and 100 shares issued and outstanding.

Said stock shall be payable in whole or in part, in cash or other property, tangible or intangible, or in labor or services actually performed for the corporation, at such valuations as may be determined, from time to time, by the Board of Directors of the Corporation.

ARTICLE IV

This Corporation shall exist perpetually, unless sooner dissolved according to law, commencing on the date of the execution and acknowledgement of these Articles.

ARTICLE V

The street address of the initial registered office of this Corporation is **3066 Natoma Way, Orlando, Florida 32825** and the name of the initial Registered Agent of this Corporation at that address is *MARIE CICCARIELLO*.

ARTICLE VI

The number of Director(s) of this Corporation shall initially be one (3). The Board of Directors shall manage this Corporation. The exact number of Director(s) may be increased or decreased, from time to time, by the Laws of the Corporation, but at no time shall there be less than one Director.

The name and street address of the initial Director(s) of the Corporation, who shall hold office for the first year or until successors are elected or appointed and have qualified, shall be:

NAME

ADDRESS

**Marie Ciccariello
President, Vice President,
Treasurer**

**3066 Natoma Way
Orlando, Florida 32825**

ARTICLE VII

The name and post office address of the Subscribers and the number of shares of stocks are as follows:

NAME

ADDRESS

SHARES

**Marie Ciccariello
President, Vice President,
Treasurer**

**3066 Natoma Way
Orlando, Florida 32825**

100

CERTIFICATE DESIGNATED PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHO MAY BE SERVED IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT, **MAGICAL AUTO TRANSPORT, INC.** DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA. WITH ITS PRINCIPAL PLACE OF BUSINESS LOCATED IN THE CITY OF ORLANDO, STATE OF FLORIDA HAS NAMED **MARIE CICCARIELLO** FROM THE CITY OF ORLANDO, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE:

Marie Ciccariello

TITLE:

DATE:

3-8-2007

HAVING BEEN NAMED TO ACCEPT SERVICES OF PROCESS FOR THE ABOVE STATE CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISION OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE:

Marie Ciccariello

(REGISTERED AGENT)

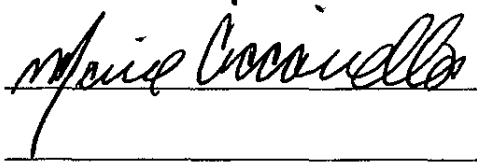
DATE:

3-8-2007

07 APR - 5 PM:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

IN WITNESS WHEREOF, the undersigned, being the original Subscriber to the capital stock herein above names, for the purposes of forming a Corporation to do business both within and without the State of Florida, under the laws of Florida, does make and files these Articles, hereby declaring and certifying that the facts herein stated are true, and agreeing to take the number of shares herein above set forth, this 1st day of April, 2007



STATE OF FLORIDA)

SS:

COUNTY OF MIAMI - DADE)

BEFORE ME, the undersigned authority personally appeared to me well known to me to be the individual described in, and he executed the foregoing Articles of Incorporation, and acknowledged before me that he executed the same for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto affixed my hand and official seal at said County and State, this April 12 day of April, 2007



NOTARY PUBLIC, STATE OF FLORIDA
MY COMMISSION EXPIRES:

