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2007 JUL 30 P 1:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

D. WHITE JUL 30 2007

## COVER LETTER

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

SUBJECT: Transport of Palm Beach, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Nuno M. Almeida

Name (Printed or typed)

706 Cresta Circle

Address

West Palm Beach, FL 33413

City, State & Zip

(401) 641-5616

Daytime Telephone number

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

# 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:

Transport of Palm Beach, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

706 Cresta Circle  
West Palm Beach, FL 33413

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Auto Transport

## ARTICLE IV SHARES

The number of shares of stock is:

500 shares (no par value)

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Nuno M. Almeida (President, Secretary & Treasurer)  
706 Cresta Circle  
West Palm Beach, FL 33413

## ARTICLE VI REGISTERED AGENT

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

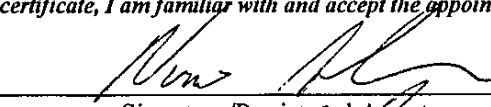
Nuno M. Almeida  
706 Cresta Circle  
West Palm Beach, FL 33413

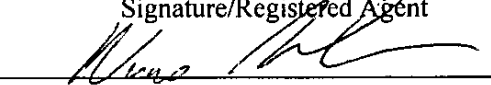
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nuno M. Almeida  
706 Cresta Circle  
West Palm Beach, FL 33413

\*\*\*\*\*  
*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 famillar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Signature/Incorporator

FILED

2007 JUL 30 P 1:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Date