

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Effective Date

Fax Number

: (850)617-6381

01-01-08

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone

: (305)552-5973

Fax Number

: (305)220-1440

FLORIDA PROFIT/NON PROFIT CORPORATION

Florida Telemarketing & Transport Service Inc.

Estimated Charge	\$78.75
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ARTICLES OF INCORPORATION

Effective Date ·

The undersigned incorporator(s), for the purpose of forming a 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: Floreida Telemarketing + Transport

(EFFECTIVE 1/1/07)

ARTICLE II - PRINCIPAL OFFICE

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

6331 SW QY AVE Hiami A. 33173

ARTICLE III - SHARES

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

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

6331 SW 94 AVE Hromi FL 33173

CARLOS L. CASTANEDA

07 DEC 28 AM 9: 27
SECRETARY OF STATE
AND LAHASSEE, FLORIDA

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ARTICLE V - INCORPORATOR

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

CARLOS L. COSTAÑEDA 6331 SW 940WE HIGHER CL. 33173

The undersigned incorporator has executed these Articles of Incorporation this 27 day of DECEMBER2007

Signature

97 DEC 28 AM 9: 27
SECREVAL OF STATE

ARTICLE VI- DIRECTOR(S)

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

(president)

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

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