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Florida Department of State

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FLORIDA PROFIT/NON PROFIT CORPORATION White Cloud Trucking Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

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:

White Cloud Trucking Inc.

ARTICLE II PRINCIPAL OFFICE

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

119 Chandler Street Interlachen, FL 32148

ARTICLE III SHARES

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

100 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Bruce Rocha 119 Chandler Street Interlachen, FL 32148

Prepared By:
Bruce B. Hubbard
77 East John St.
Hickeville, New York 11801
1-518-935-3940

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ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(cs) and title(s) to these Articles of Incorporation is(are):

Bruce Rocha - President/Director 119 Chandler Street, Intertachen, FL 32148 Barbara Rocha - Vice President/Director 119 Chandler Street, Interlachen, FL 32148

ARTICLES VI INCORPORATOR(S)

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

Bruce Rocha 119 Chandler Street, Intertachen, FL 32148 Barbara Rocha 119 Chandler Street, Interlachen, FL 32148

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

19th day of September 20 11

Bruce Rocha

-Signature

Barbara Rocha

-Signature

1. The name of the corporation is: White Cloud Trucking inc.

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

2. The name and address of the reg	istered agent and office is:
	Bruce Rocha
	Name
	119 Chandler Street
•	(P.O. Box or Mail Drop Box NOT Acceptable)
	Interlachen, FL 32148
	(City / Stato / Zip)
corporation at the place designation and agree to act in this cap	d agent and to accept service of process for the above stated ted in this certificate, I hereby accept the appointment as registered bacity. I further agree to comply with the provisions of all the statutes sets performance of my duties, and am familiar with and accept the istered agent.
Bruce Rocha SIGNATURE	09/19/2011 (Date)