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SECRETARY OF STATE

TALLATE SERVICES

10/9/12

## **COVER LETTER**

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:						
\$70.00 Filing Fee  & Certificate of Status  \$78.75 Filing Fee  & Certificate of Status  \$78.75 Filing Fee  & Certified Copy  & Certified Copy  & Certificate of Status  ADDITIONAL COPY REQUIRED						
FROM: (FELIX CRUZ, PRESIDENT)  Name (Printed or typed)						
FROM: (FELIX CRUZ, IRESIDENT)  Name (Printed or typed)						
3251 W. OKEECHOBEE ROAD						
HIALEAL FL 33012 City, State & Zip						
(305) -213-6791  Daytime Telephone number						
E-mail address: (to be used for future annual report notification)						

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)

The name of the corporation shall be: TRi - C	DUNTU ROPE	L-OFF	SERVICES, JNG
ARTICLE II PRINCIPAL OFFICE			r
Principal street address		Mailing addre	ss, if different is:
H'ALEAH, FL	<u> </u>	H.ALGA	h, FL 33013
ARTICLE III PURPOSE			
The purpose for which the corporation is organized is	S:		≥ 24 1
TRANSPORT SCRAF	MEIAL		2 0 C
			<i>9.8</i> € =
ADTICLE TO CHARGO			
ARTICLE IV SHARES The number of shares of stock is: 100			
<b>,</b>			**************************************
Name and Title: FELIX ( KU)	Name and	I Title: PRE	SIDEWT
Address: 67/8AST - 46	Address:	671	8AST-46ST.
HI ALEAN, EL	330/3		ALEAH, FL3301
Name and Title:Address:	A 3.1	l Title:	
Address.	Address.		
<del> </del>			
Name and Title:		l Title:	
Address:	Address:	<del></del>	
ARTICLE VI REGISTERED AGENT			· · · <del>-</del> · <del>-</del> ·
The name and Florida street address (P.O. Box NOT	acceptable) of the registere	ed agent is:	
Name: FELTY CRU Address: 671 EAST	111. S.F.		
HULLESS.	F/ 227/	ጓ	
ARTICLE VII INCORPORATOR	, , - Ow, ,	•	
The name and address of the Incorporator is:	. ~		
Name: FELIX CR	U ot		
Address: 671 EAST	-465t		
Having been named as resistand as not to account an	FC 380/3	~	
Having been named as registered agent to accept ser this certificate, I am familiar with and accept the appo			
VAI.	0 0	Ü	10 00 10
Required Signature/Register	* 4	<del>_</del>	10-03-12
Required Signature/Register	rea Agent		Date
I submit this document and affirm that the facts state	ted herein are true. I am	aware that the false	e information submitted in a
document to the Department of State constitutes a thir	a aegree jeiony as provided	a jor in s.817.155, F	X.
* //fellie (ner-			10-03-12
Required Signature/Incor	porator	-	Date