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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION  
DANS TRANSPORTATION CORP

Certificate of Status	0
Certified Copy	1
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**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: DANS TRANSPORTATION CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

10110 S. BUCKSKIN AVEFLORAL CITY, FL 34436**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: EVA MOLINA AGUILAR (P)

Name and Title: \_\_\_\_\_

Address 10110 S. BUCKSKIN AVE

Address: \_\_\_\_\_

FLORAL CITY, FL 34436

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

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 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: EVA MOLINA AGUILAR  
 Address: 10110 BUCKSKIN AVE  
FLORAL CITY, FL 34436

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: EVA MOLINA AGUILAR  
 Address: 10110 BUCKSKIN AVE  
FLORAL CITY, FL 34436

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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

/s/ Eva Molina Aguilar \_\_\_\_\_  
 Required Signature/Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

/s/ Eva Molina Aguilar \_\_\_\_\_  
 Required Signature/Incorporator Date