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TRANSMITTAL LETTER

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

600001420208 -03/03/95--01015--006 -++++78.75 ++++*78.75

Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$122.50 \$131.25 Filing Fee Filing Foo Filing Fee Filing Fee, Certified Copy & Certificate & Certified Copy & Cortificate FROM: Name (printed or typed) 241-7122 Daytime Telephone number

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

B. WEGIL.

MVS

2 1995

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:

AbovE ALL MOVING & STORAGE, INC.

ARTICLE II PRINCIPAL OFFICE

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

1876 PuliJAM AUE

RIGEWOOD, N. 4. 11985

ARTICLE III SHARES

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

20 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MR BILL MARCUS 1066 N.E. 1075 ST. HALLENDALE FLORIDA

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of incorpora-

BILL MARCUS 1876 PUTNAM AUE RIDGEWOOD, N.Y 11785

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

15T. day of 1148ch 1995.

Bill Harend Signature

Signature

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: ABOVE ALL MOVING Y	STORAGE YNS
2. The name and address of the registered agent and office is: Bill Marcus Name 1066 N.E. 10 STRCEL. (P.O. Box not acceptable) HALLENDALE FLA. (City/State/Zip)	FILEII 95 N.3 -2 MIII: 01 SECRETARY OF STATE TALLAHASSEE FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as register. I agent.

Bill Haseus 2/28/95 (Optie)