

3/95

FLORIDA DIVISION OF CORPORATIONS

12:20 AM

((H95000003664)))

PUBLIC ACCESS SYSTEM
ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS

FROM: FAS-T CORP. AGENTS, INC.

DEPARTMENT OF STATE

8405 NW 53RD ST

STATE OF FLORIDA

SUITE C-100

409 EAST GAINES STREET

MIAMI FL 33166- 0-5295

TALLAHASSEE, FL 32399

CONTACT: LIDIA FERNANDEZ

FAX: (904) 922-4000

PHONE: (305) 599-0839

FAX: (305) 592-9591

((H95000003664)))

DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: ALLIANCE MOVING AND SHIPPING INC.

FAX AUDIT NUMBER: H95000003664

CURRENT STATUS: REQUESTED

DATE REQUESTED: 03/30/1995

TIME REQUESTED: 12:20:11

CERTIFIED COPIES: 1

CERTIFICATE OF STATUS: 0

NUMBER OF PAGES: 3

METHOD OF DELIVERY: FAX

ESTIMATED CHARGE: \$122.50

ACCOUNT NUMBER: 071001002335

Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document.

((H95000003664)))

** ENTER 'M' FOR MENU. **

3/30/95

FLORIDA DIVISION OF CORPORATIONS

PUBLIC ACCESS SYSTEM

ELECTRONIC PROCESSING MENU

12:20 AM

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 MAR 30 PM 4:22

FILED

FLORIDA DIVISION OF CORPORATIONS

95 MAR 30 PM 1:57

RECEIVED

H95000003664

**ARTICLES OF INCORPORATION
OF**

ALLIANCE MOVING AND SHIPPING INC.

FILED
95 MAR 30 PM 4:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: *ALLIANCE MOVING AND SHIPPING INC*

The principal place of business of this corporation shall be: *2290 N.W. North River Dr
Miami, FL 33125*

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 900 Shares \$ 5.00 par value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Roberto Deno	2290 N.W. North River Dr. # 120 Miami, FL 33125
Mario Copelenko	2290 N.W. North River Dr. # 120 Miami, FL 33125
Marilyn Minks	2290 N.W. North River Dr. # 120 Miami, FL 33125

Prepared by: Roberto Deno
2290 N.W. North River Dr. # 120
Miami, FL 33125
(305) 258-2983

H95000003664

H95000003664

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Roberto Deno 2290 N.W. North River Dr. # 120 Miami, Fl 33125

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 20 day of MARCH, 1995

Signature(s) of Incorporator(s)



H95000003664

H95000003664

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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: Alliance Moving and Shipping Inc.

2. The name and address of the registered agent and office is:

Roberto Deno

(P.O. BOX NOT ACCEPTABLE)

2290 N.W. North River Dr. # 120

(CITY/STATE/ZIP)

Miami, FL 33125

SIGNATURE [Signature]

(corporate officer)

TITLE Director

DATE 30 March 95

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE [Signature]

DATE 30 March 95

REGISTERED AGENT FILING FEE:

H95000003664