P95000031419

PUBLIC ACCESS SYSTEM

(((H95000004459))) ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: EMPIRE CORPORATE KIT COMPANY
1492 W FLAGLER ST
SUITE 200
MIAMI FL 33135- 0-0000
CONTACT: RAY STORMONT
PHONE: (305) 541-3694
FAX: (305) 541-3770

(((H95000004459))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: MITCHELL TRANSFER CORP.

FAX AUDIT NUMBER:	H95000004459	CURRENT STATUS:	REQUESTED
DATE REQUESTED:	04/20/1995	TIME REQUESTED:	14:44:18
CERTIFIED COPIES:	1	CERTIFICATE OF STATUS:	0
NUMBER OF PAGES:	4	METHOD OF DELIVERY:	FAX
ESTIMATED CHARGE:	$122.50	ACCOUNT NUMBER:	072460003255

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.

(((H95000004459)))

** ENTER 'M' FOR MENU. **
ENTER SELECTION AND <CR>:
Help F1 Option Menu F2 NUM CAPS Connect: 00:09:

FILED
95 APR 21 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/21

R.A. Cowart

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 21, 1995

EMPIRE CORPORATE KIT COMPANY

MIAMI, FL

SUBJECT: MITCHELL TRANSFER CORP.
REF: W95000006589

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole
Corporate Specialist

FAX Aud. #: H95000004459
Letter Number: 595A00018649

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314

FILED
95 APR 21 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P95000044459

ARTICLE OF INCORPORATION

OF

MITCHELL TRANSFER CORP.

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: MITCHELL TRANSFER CORP.

The principal place of business of this corporation shall be: 2387 N.W. 23 Ave. Miami, Fl. 33142

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 State, 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: 100 X $10.00 = $1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

P95000044459

Prepared by:
Hector Hall, acct.
692 W. 29 St. #9
Hialeah, Fl 33012
305-887-4185

H95000044459

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(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):

Miguel Lopez Director
2357 N.W. 23 Ave. Miami, Fl. 33142

ARTICLE VI INCORPORATOR(S)

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

Miguel Lopez President, Secretary and Treasurer
2357 N.W. 23 Ave. Miami, Fl. 33142 100 Shares

The undersigned has(have) executed these Article of Incorporation this ___20____day of___April_____,19_95__.

Signature/Title

Signature/Title

Signature/Title

H95000044459

887-4185
Heather Hall

H95000004459

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0801, 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: MITCHELL TRANSFER CORP.

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

Miguel Lopez
(Name)

2357 N.W. 23 Ave.
(P. O. BOX NOT ACCEPTABLE)

Miami, Fl. 33142
(CITY/STATE/ZIP)

FILED
95 APR 21 PM 1:11
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 MY POSITION AS REGISTERED AGENT.

SIGNATURE [signature]

DATE 04-20-95

H95000004459