P950059062 TRANSMITTAL LETTER 90%

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

SUBJECT:	SHIPPERS	LNUMITER	, luc					
	(Proposed corporate nar	ne - must include sufi	-1	00001543445 07/21/9501071008 ****122.50 ****122.50				
Enclosed is an original and one (1) copy of the articles of incorporation and a check								
for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Cop & Certificate	v				
FROM:	OM: JUAN B. GACCI Name (printed or typed)							
	7951 A	7951 SW GTH STREET # 104 Address						
City, State & Zip								
	(.305) Daytime Tel	423-24<i>m1</i> ephone number	<u> </u>	75				

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 24, 1995

JUAN B. GALLI 7951 SW 6TH STREET STE 104 PLANTATION, FL 33324

SUBJECT: SHIPPERS UNLIMITED, INC.

Ref. Number: W95000014798

We have received your document for SHIPPERS UNLIMITED, INC. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

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) 487-6878.

Letter Number: 595A00035064

Terri Buckley Corporate Specialist

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

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: -SHIPPENS (INCIMITED, INC.

ARTICLE II PRINCIPAL OFFICE

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

7951 SW 6IH STREET SUITE 104 PLANTATION FL 33324

ARTICLE III SHARES

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

TWO THOUSAND (2000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JUAN B. GALLI 4951 SW GIMST #104 FLANTATION TO 53324

ARTICLE V INCORPORATORIC.

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

- & JUAN B. GALLI 3520 OAKS WAY # 201 POHRAND BEACH, TL 33069
- RAFACE LANDA
 914 GTANTON DRIVE
 FORT LANDERDALE, TO 33326

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

Signature
Signature
Signature

Articles of Incorporation Filing Fee - \$35

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 o	f the corporation is:	SHIPPERS	Chicinisto	1. 100°
2 The name a	nd address of the regi	etered agent and of	fica is:	
z. The name a	id dddiess of the regi	stered agent and or	1100 13.	
		JUAN B. G.	166)	
		(Name)		
	7951	SW 67 5	IPAT # 104	
	(P.O.	Box not acceptable)	·	
	Punin	PON TE 3	3324	
		(City/State/Zip)		
Having been na above stated co the appointmen to comply with t mance of my du as registered ag	med as registered ago rporation at the place t as registered agent a he provisions of all sta ties, and I am familiar ent()	ent and to accept so designated in this c and agree to act in t atutes relating to the with and accept the	ervice of process fortificate, I hereby his capacity. I furt e proper and comp obligations of my	or the y accept her agree plete perfor y position
	Signature)		7/18/95 (Date)	