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600001949526 -06/04/96--01056--002 ++**122.50 ++**122.50

Ola Alyan 3474 Austin St Sarasota, FL 34231

May 31, 1996

Dear Sirs,

Please accept this as my request to incorporate. Enclosed are two copies of the Articles of Incorporation for Star Cab Inc. and the \$122.50 necessary for incorporation. Also could you please back-date the incorporation to take as of June 1, 1996? Thank you in advance.

Sincerely, ola Slyen.

Ola Alyan

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SECRETARY OF S

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ARTICLES OF INCORPORATION

OF

STAR CAB, INC.

FILED

96 JUNI-4 MI 8-55

FFG. 17-3 OF STATE TALLAHALME, FLORIDA

ARTICLE I - NAME

The name of this corporation is: Star Cab, Inc.

ARTICLE II - DURATION

This corporation shall have perpetual existence commencing on the date of filing of these Articles of Incorporatoin with the Department of State.

ARTICLE III - NATURE OF BUSINESS

The corporation is authorized to transact any and all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 100 shares of ONE DOLLAR AND NO/100 (\$1.00) par value common stock which shall be designated as "Common Share".

ARTICLE V - PRE-EMPTIVE RIGHTS

Every Shareholder, upon the sale for cash of any new stock of this corporatoin, shall have the right to purchase his pro-rate share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to other.

ARTICLE VI - ADDRESS

The initial principal place of business of this corporation in the State of Florida is: 3474 Austin St, Sarasota, Florida, 34231. The corporation may from time to time move the principal office to any other address in Florida.

ARTICLE VII - REGISTERED AGENT

The name and address of the initial Registered Agent of this corporation is:

OLA ALYAN 3474 Austin Street Sarasota, Florida 34231

ARTICLE VIII - DIRECTORS

This corporation shall have two directors initially. The number of directors may be increased or diminished from time to time, by by-laws, adopted by the shareholders. The name and address of the initial directors are:

OLA ALYAN, 3474 Austin Street, Sarasota, Florida 34231

ISSA ALYAN, 3474 Austin Street, Sarasota, Florida 34231

ARTICLE IX - INCORPORATOR

The name and post office address of the incorporator to these Articles of Incorporation is:

OLA ALYAN, 3474 Austin Street, Sarasota, Florida 34231

ARTICLE X - OFFICERS

The corporation shall have a President, Secretary and Treasurer who shall be elected by the shareholder together with such other officers and assistant officers as may be deemed necessary and are eligible. The names and post officese addresses of the initial officers and assistant officers as may be deemed necessary and are eligible. The names and post office addresses of the initial officers are

OLA ALYAN, 3474 Austin Street, Sarasota, Florida 34231 President and Secretary

ISSA ALYAN, 3474 Austin Street, Sarasota, Florida 34231 Vice President and Treasurer

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

Pursuant to Sections 48.091 and 607.034, Florida Statutes, the following is submitted:

FIRST that STAR CAB, INC desiring to organize or qualify under the laws of the State of
Florida, with its principal place of business at 3474 Austin Street, Sarasota, Florida 34231, has
named OLA ALYAN, located at 3474 Austin Street, Sarasota, Florida 34231 as its agent to
accept service of process within the State.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated Corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

OLA ALYAN

3474 Austin St

Sarasota, FL 34231

(941) 952-0771

ARTICLE XI - INDEMNIFICATION

The corporation shall indemnify any Officer or Director or any former officer or director, to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned has placed his hand and seal at Sarasota, Florida this 31 day of 3000, 1996.

OLA ALYAN

STATE OF FLORIDA

) SS

COUNTY OF SARASOTA)

I HEREBY CERTIFY that on this day, before me a Notary Public, duly authorized in the State and County named above to take acknowledgements, personally appeared OLA ALYAN, who is personally known to me and known to be the person described as subscriber in and who executed the foregoing articles of Incorporation, and she acknowledged before me that she subscribed to these Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above this 31 day of ______, 1996.

Signature of Notary Public Printed name of Notary:

Commission expiration:

OVPICIAL NOTARY SEAL
KATHERINE L RAHN
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. OCX5545
MY COMMISSION EXP. MAR. 14,1897

ENTRE MARKET