P960000082780 TRANSMITTAL LETTER

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

100001948991 -09/17/96--01092--011 *****78.75 *****78.75

SUBJECT: AREA DELIVERY - TRANSFER, INC.

(Proposed corporate name - must include suffix)

Enclosed is an origina for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	& Certified Copy C	\$131.25 Filing Fee, ertified Copy & Certificate	nd a check 96 OCT -8 TALLARASS
FROM:	William Name	(printed or typed)		PH 1: 37 EELI LORIDA
	C/EARWA	TEIR, F1. 3461: ty, State & Zip	<u> </u>	
	<u> </u>	7 - OOS / Telephone number	—— W9(0-19686

AL OCT - 9 1996

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 18, 1996

WILLIAM F. RUSSELL 1810 LOMBARDY DR. CLEARWATER, FL 34615

SUBJECT: AREA DELIVERY & TRANSFER, INC. Ref. Number: W96000019686

We have received your document for AREA DELIVERY & TRANSFER, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

The document must state the number of shares of authorized stock.

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) 487-6928.

Agnes Lunt Corporate Specialist

Letter Number: 696A00043247

WORKING HOURS TELEPHONE # 813-409-0081 Home Telephone 813-442.7815

ARTICLES OF INCORPORATION

FILED

96 OCT -8 PH 1: 37

AT CARRAGE STATE

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:

AREA DELIVERY & TRANSFER , INC.

ARTICLE II · PRINCIPAL OFFICE

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

1810 LOMBARDY DR. CLEARWATER, Fl. 34:15

ARTICLE III SHARES

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

1 SHARE NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

William F. Russell 1810 Lombardy Dr. Cléarwater, Fl. 34615

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

William F. Russell 1810 Lombredy Dr. . Clearwater, Fl. 34615

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

12 day of <u>SEPTEMBER</u>, 19<u>96</u>.

(An additional article must be added if an effective date is requested.)

William F. Musself
Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:	AREA DELIVERY &	TRANSFER, INC.
2. The name and address of the reg		
<u>wilia</u>	1 F. RUSSE//	
1810 La	DMK ARDY DR. BOX OF STAIL DTOP BOX NOT ACCEPTABLE)	CT-8 PL
Clearu	ATEN, Fl. 34615 (CITY/STATE/ZIP)	一

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 registered agent.

William F. Pusself 9-12-96 (SIGNATURE) (DATE)