1991000081901

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

SUBJECT:	UNIQUE TRUCKING INC.			n (
<u> </u>	(Proposed	corporate name - must include	e sullix)	, , ,	
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Enclosed is an original	and one(1) copy of the articl	les of incorporation and a c	CHECK IOI .		
\$70.00	\$78.75	XI\$122.50	\$131.2		
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fe Certified		
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		ADDITIONAL CO	PY REQUI	RED]
FROM:	HAND IN HAND PROFES				
		(Printed or typed)			
	6918 SILVER STAR RD				
-		Address			•
	ORLANDO, FLORIDA, 32	2818		4.	
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NOTE: Please provide the original and one copy of the articles.

ne 10/13/97

FILED

ARTICLES OF INCORPORATION

97 OCT 10 AM 9: 19

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation

SECRETART OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

UNIQUE TRUCKING INC.

ARTICLE II PRINCIPAL OFFICE

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

656 OAKFORD WAY, ORLANDO, FLORIDA, 32811.

ARTICLE III SHARES

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

ONE HUNDRED SHARES (100)

230

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

WILLIAM T. CAMPBELL 656 OAKFORD WAY, ORLANDO, FL, 32811.

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

WILLIAM T. CAMPBELL 656 OAKFORD WAY, ORLANDO, FLORIDA, 32811	
X wants	
Signature/Incorporator	
Date	

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

Having been named as registered agent and to accept sprvice of p	rocess for the above stated corporation at the place designated in this
Provisions of all statutes relating to the number of the	rocess for the above stated corporation at the place designated in this and agree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept the
obligations of my position as registered agen	

Signature/Registered Agent

Date