P98000027506

DATE 3/19/98

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

900002465319-- \$
-03/23/98--01100--016
****122.50 ****122.50

Tallahassee, FL 32314	****122.50 ****122.50			
	Office Tree Only			
Re:	McClain Transport , Inc.			
Gentlemen:				
Enclosed please find the origin check in the amount of \$122.50	and one copy of the Articles of Incorporation, together with my			
This represents the cost of the Registered Agent Designation	ing Fees, Certified Copy of Articles of Incorporation and Fee for the above named corporation.			
	Very truly yours.			
	Gatricia McClain Patricia McClain			
	McClain Transport, Inc.			
98 MAR 23 AM 9: 39 SECRETARY OF STATE TALLAHASSEE, FLORIDA	MaiLing Address of Corporation McClain Transport, Inc. 3581 S. Apopka Avenue Inverness, FL 34452-7009			
	PHONE -			

(352) 344-1362

Number

Area Code

Seminole Form 215: Trans. Letter (0195)

ARTICLES OF INCORPORATION

of

(name of corporation)

McClain Transport, Inc.

The undersigned acting as the incorporate the following articles of incorporation for such	tors of a corporation under the Florida Business C h corporation:	forporation Act, adopt(s)
The name of the corporation is:	ARTICLE I - CORPORATE NAME	98 37
McClain	Transport, Inc.	
This corporation shall exist perpetually u	ARTICLE II - DURATION unless dissolved according to Florida law.	M 9: 39
	ARTICLE III - PURPOSE	
The corporation is organized for the purp United States and the State of Florida.	oose of engaging in any activities or business perm	nitted under the laws of the
	ARTICLE IV - CAPITAL STOCK	
The corporation is authorized to issue	100 shares of common stock, par value \$ _	5,00 per share.
The street address of the initial principal	ICLE V - INITIAL PRINCIPAL OFFICE office and, if different, the mailing address is:	
STREET ADDRESS		
3581 S. Apopka Avenue		=
CITY Inverness,	FLORIDA	ZIP 34452
Mailing address, if different		
STREET ADDRESS		
CITY	FLORIDA	ZIP
ARTICLE VI -	INITIAL REGISTERED OFFICE AND AGEN	TT
	ered office and the name of the initial register	· -
NAME		
ADDRESS ricia McClain		
CITY3581 S. Apopka Ave Inve	erness FLORIDA	ZIP 34452

ARTICLE VII - INITIAL BOARD OF DIRECTORS							
This corporation shall have _	one	(directors initially. The number of directors may be				

NAME Patricia McClain		
ADDRESS 581 S. Apopka Avenue		
CITY Inverness	STATE FL	ZIP 34452
NAME	-	
ADDRESS	<u> </u>	
CITY	STATE	ZIP
NAME		<u> </u>
ADDRESS		· · · · · · · · · · · · · · · · · · ·
CITY	STATE	ZIP
ADDRES\$581 S. Apopka Avenue CITY Inverness NAME	STATE FL	ZIP 34452
CITY Inverness	STATE FL	ZIP 34452
ADDRESS	<u> </u>	
CITY	STATE	ZIP
NAME		
ADDRESS		- · · · · · · · · · · · · · · · · · · ·
CITY	STATE	ZIP
The undersigned incorporator(s) have executed these A day ofMarch	rticles of Incorporation th	is <u>18</u>
	Patricia M	CClaum (Signature)
_		(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

McClain Transport, Inc. (name of corporation)	EE, FLO	98 MAR 23 AM 9: 39	
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submit The above corporation, organized under the laws of the State of Florida with its reg		office	-
as indicated in the Articles of Incorporation at3581 S. Apopka Avenue	•		
Inverness, FL 34452	=	<u>.</u> .	بسياك الم
has named Patricia McClain located at the aforesaid address, as its registered agent to accept service of process state.	within th	uis	<u>.</u> <u></u> -
Having been named as registered agent and to accept service of process for the abore corporation at the place designated in this certificate, I hereby accept the appointmentered agent and agree to act in this capacity. I further agree to comply with the provistatutes relating to the proper and complete performance of my duties, and I am fam and accept the obligations of my position as registered agent.	ent as reg	gis- Tall	
Formicia McClain 3-18-98 (Signature) (Date)		 ā	<u>.</u>