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TRANSMITTAL LETTER

98 JUL -7 AM 9: 10

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

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SUBJ	ECT: Mac A	uto Transport	ireci Inc ime - must include suf	- 12 (12 (12 (12 (12 (12 (12 (12 (12 (12 					
Enclo	sed is an origin	al and one (1) co	py of the articles o		nd a check				
for:	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filling fee & Certified Copy Additional Cop	# \$131.25 Filling Fee, Certified Copy & Certificate y Required					
FROM: Timothy David Mcanallen Name (printed or typed) 9117 Hatian Way 786-4585 Address									
Jacksonville, FL 32221-5516 City, State & Zip Daytime Telephone number									
		·		Hall SUL	7,1998				

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 22, 1998

TIMOTHY DAVID MCANALLEN 9117 HATIAN WAY JACKSONVILLE, FL 32221-5516

Direct

SUBJECT: MAC-AUTO TRANSPORT, INC.

Ref. Number: W98000009044

Trunsport

We have received your document for MAC-AUTO TRANSPORT, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

The document must have original signatures.

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.

Please return the original and one copy of 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 (850) 487-6915.

Pamela Hall Document Specialist

Letter Number: 998A00021822

FILED

ARTICLES OF INCURURATION

98 JUL -7 - AM 9: 10 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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.

> NAME ARTICLES

The name of the corporation shall be:

MAC-AUTO TRANSPORT DIRECT INC

ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

9117 HATIAN WAY JACKSONVILLE FL 32221

BHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time ARTICLEIL 500 SHANES

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

TIMOTHY DAVID MCANALLEN

Junothy D. Mcanaller

JACKSONVILLE, FL 32221

INCORPORATOR(8) See instructions for officers/directors

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

TIMOTHY D. MCANALLEN 9117 HATTAN WAY JACKSONVILLE FZ 32221

The under	tigne	ed inco	rporator(s) has(hav	e) executed these Articles of Incorporation this
12			100.	00

Signature

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

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FILED 98 JUL -7 AM 9: 10

DIRECTINC

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTARS WEIFLORIDA UNDERSIGNED CORPORATION ORGANIZED THE SECRETARY OF STATE FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:	MAC-AUT	70 TRV	INSPORT	DIRECT		
2.	The name and address of the reg	gistered agent and office	is:				
	TIMOT	HY DAYIC	MCA	NALLEI	Y		
(P.O. Box of Mail Drop Box NOT ACCEPTABLE)							
		,	, •		-C11		

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.