

P98000067104

TRANSMITTAL LETTER

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

200002600982--7
-07/28/98--01092--004
*****78.75 *****78.75

Subject : A F Auto Transport, Inc.

Enclosed is an original and 1 copy of the Articles of Incorporation and a check for \$78.75 to cover the filing fee and certificate.

Please respond to:

Betty Fulton
14045 NE 9th Avenue
North Miami, FL 33161
(305) 986-8400

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JUL 28 AM 9:14

RP
07-31-98

ARTICLES OF INCORPORATION

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:

AF AUTO TRANSPORT , INC.

ARTICLE II PRINCIPAL OFFICE

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

**14045 NE 9th Avenue
North Miami, FL 33161**

ARTICLE III SHARES

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

1000 common stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Michelle Cruz
20533 Biscayne Blvd.
Suite 212
Aventura FL, 33180

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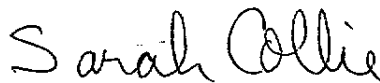

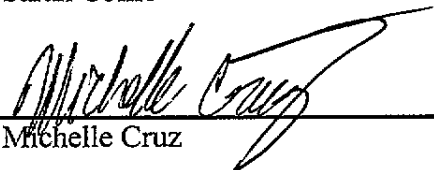
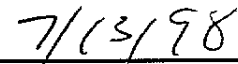

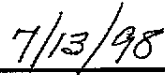
ARTICLE V INCORPORATOR(S)

The Original Incorporators are:

Sarah Collie
4956 NW 186th St
Opa Locka, FL 33055

Michelle Cruz
20533 Biscayne Blvd
Suite 212
Aventura, FL 33180

Betty Fulton
14045 NE 9th Avenue
North Miami, FL 33161

	
Sarah Collie	Date
	
Michelle Cruz	Date
	
Betty Fulton	Date

**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE**

PURUANT 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: AF AUTO TRANSPORT, INC.

2. The name and address of the registered agent and office is:

MICHELLE CRUZ

(name)

20533 Biscayne Blvd #212

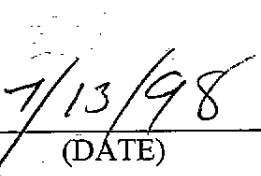
(P.O. Box or Mail Drop Box NOT acceptable)

Aventura FL. 33180

(City/State/Zip)

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.


(SIGNATURE)


(DATE)

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