(SAMPLE LETTER OF TRANSMITTAL)

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

600002690196--1 -11/18/98--01012--014 ****122.50 ******78.75

Re: C & J Freightways , Inc. (Name of Corporation)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

AUTHORIZATION BY PHONE TO CORRECT 23 470 DATE

C & J Freightways Lnc.
(Name of Corporation)

PHONE

(850) 626-5701

Area Code Number Ext.

O'N'

animala Form 215; Trans. Letter (0195)

ARTICLES OF INCORPORATION

c	of			
C & J Freig	ghtways In	с.		
(name of c	orporation)			<u>-</u>
The undersigned acting as the incorporators of a corporation the following articles of incorporation for such corporation:	on under the Flo	rida Business Co	rporation A	ct, adopt(s)
ARTICLE I - CO. The name of the corporation is:	RPORATE NAM	1E		6
C & J Freig	ghtways [In	с.	<u>````</u>	i, q
ARTICLE II	- DURATION	ida law.		o de la companya de l
ARTICLE III The corporation is organized for the purpose of engaging i United States and the State of Florida.	I - PURPOSE n any activities	or business perm	nitted under	the laws of the
ARTICLE IV - Co. The corporation is authorized to issue500shares or		K k, par value \$	1.00	per share.
ARTICLE V - INITIAL The street address of the initial principal office and, if diffe				
STREET ADDRESS 6904 Cater Street	-	:		
CITY Bagdad, Mailing address, if different	FLORIDA	FL	ZIP	32530
STREET ADDRESS				
P.O. Box 763				are .
CITY Bagdad,	FLORIDA	FL	ZIP 3	32530
ARTICLE VI - INITIAL REGIS				41
The street address of the initial registered office and t	the name of the	e initiai registei	ed agent at	the office is:
NAME Clyde A. Littles	·-		 	
ADDRESS 6904 Cater Street	-			

32530

ZIP

FL

FLORIDA

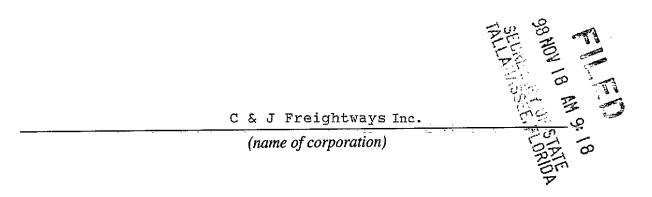
Bagdad,

CITY

ARTICLE VII - INITIAL BOARD OF DIRECTORS

NAME Clyde A. Littles			
ADDRESS P.O. Box 763	- <u></u>	-	
CITY Bagdad	STA	TE FL	ZIP 32530
NAME Joyce M. Littles		1,13	32330
ADDRESS p.O. Box 763		<u> </u>	*
CITY Bagdad	STA	TE FL	ZIP 32530
NAME		· · · · · ·	
ADDRESS	- : A		
CITY	STA	TE	ZIP
ADDRESS P.O. Box 763			
he names and addresses of the incorporator	s signing these Articles of I	ncorporation are as	follows:
ADDRESS P.O. Box 763	<u></u>	- ·	
CITY Bagdad	STA	TE _{FL}	ZIP 32530
NAME Joyce M. Littles			
ADDRESS P.O. Box 763			· · · · · · · · · · · · · · · · · · ·
CITY Bagdad	STA	TE _{FL}	ZIP 32530
NAME			
ADDRESS		·	
4DDRE55			
CITY	STA	TE	ZIP
CITY ne undersigned incorporator(s) have ex	ecuted these Articles of In	ncorporation this	
CITY ne undersigned incorporator(s) have ex	ecuted these Articles of In	ncorporation this	17th
ne undersigned incorporator(s) have ex	ecuted these Articles of In	ncorporation this	

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE



Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at .	6904 Cater Street								
_	Bagdad,	FL	32530					 ,	
ha	s named	C1y	de A. Li	ttles				- - 12 -	
loc	ated at the af	oresaid	l address, a	s its regis	tered agent to a	ccept service of proce	ss wi	thin th	is
sta	te.								

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.

Clyle of Letter 11-17-98 (Date)