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LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

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MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. COMMUNITY TRANSPORT SERVICES, INC. (Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☒ Walk in

☒ Pick up time

2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

3/2
99 MAR -2 AM 11:46
DIVISION OF CORPORATION
RECEIVED

Examiner's Initials

Date MARCH 1, 1999

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Re COMMUNITY TRANSPORT SERVICES, INC., Inc.
(name of corporation)

Gentlemen:

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

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.

Very truly yours,

(individual's name)

COMMUNITY TRANSPORT SERVICES, INC.
(name of corporation)

MAILING ADDRESS OF CORPORATION		
12811 S.W. 148 TERRACE RD		
MIAMI, FL 33186		
PHONE		
(305)	234-9935	
Area Code	Phone Number	Ext.

ARTICLES OF INCORPORATION

of

COMMUNITY TRANSPORT SERVICES, INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

COMMUNITY TRANSPORT SERVICES, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE Dollar(s) (\$ 1.00) par. value Common Stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	ANGEL DOMINGUEZ		
ADDRESS	12811 S.W. 148 TERRACE RD		
CITY	MIAMI	STATE	FLORIDA ZIP 33186

The principal office, if known, or the mailing address of the corporation is:

NAME	COMMUNITY TRANSPORT SERVICES, INC.		
ADDRESS	12811 S.W. 148 TERRACE RD		
CITY	MIAMI	STATE	FLORIDA ZIP 33186

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	ANGEL DOMINGUEZ	PRESIDENT
ADDRESS	12811 S.W. 148 TERRACE RD	
CITY	MIAMI	STATE FLORIDA ZIP 33186
NAME	PEDRO ALAM	TREASURY
ADDRESS	12811 S.W. 148 TERRACE RD	
CITY	MIAMI	STATE FLORIDA ZIP 33186
NAME		
ADDRESS		
CITY		STATE ZIP

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TALLAHASSEE FLORIDA

Article VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	ANGEL DOMINGUEZ		
ADDRESS	12811 S.W. 148 TERRACE RD		
CITY	MIAMI	STATE	FLORIDA ZIP 33186
NAME	PEDRO ALAM		
ADDRESS	12811 S.W. 148 TERRACE RD		
CITY	MIAMI	STATE	FLORIDA ZIP 33186
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 1st day of MARCH, 19 99

(Seal)
Angel Dominguez

(Seal)
Pedro Alam

(Seal)

(Seal)

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared: ANGEL DOMINGUEZ & PEDRO ALAM

Angel Dominguez FL DL#D552-010-50-463-0

Signature Form of Identification
Pedro Alam FL DL#A450-660-38-281-0

Signature Form of Identification

Signature Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that THEY executed these articles of Incorporation, that I relied upon the form _____ of identification of the above named person _____ as indicated opposite each name, and that an oath was not taken.

NOTATRY RUBBER STAMP SEAL

OFFICIAL NOTARY SEAL
JORGE BANOS
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC610953
MY COMMISSION EXP. JAN. 14.2001

Witness my hand and official seal in the County and State last aforesaid this
1st day of MARCH 19 99

Jorge Banos

Notary Signature

JORGE BANOS

Primed Notary Signature

**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

**CERTIFICATE OF REGISTERED AGENT
OF**

COMMUNITY TRANSPORT SERVICES, INC.

(name of corporation)

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

at 12811 S.W. 148 TERRACE RD

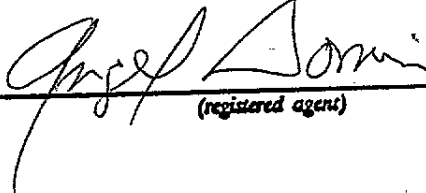
MIAMI, FLORIDA 33186

has named ANGEL DOMINGUEZ

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.


(registered agent)

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