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

300002819583----03/26/99--01040--002 \*\*\*\*\*\*79 75 \*\*\*\*\*\*78.75

SUBJECT: Soko Shipping, INC.  (Proposed corporate name - must include suffix)				
			1 1 6	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Comet & Comet Name (P.	Soldman, P.A. rinted or typed)		
	412 E. Madison St. Address			
	TAMPA FL City,	33602 State & Zip	TALLA	99 H
	(813) \$ 22. Daytime T	3 - 7457 elephone number	HASSEE,	FILE MAR 26 PM
			ONATION FLORIDA	FM 4: 39

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

of 3/3/

# ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

# ARTICLE I NAME

The name of the corporation shall be: Soko Shipping, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3402 W. Hawthorne Records Tampa, Florida 3361

# 99 HAR 26 PM 4: 39 DIVINION SECTIONS

## ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: John M. Sokolowski

3402 W. Hawthorne Rd. Tampa, Florida 33611

## ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: John M. Sokolowski 3402 W. Hawthorne Rd.

3402 W. Hawthorne Ro Tampa, Florida 33611

Signature/Incorporator

03-23-99

Date

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/Registered Agent

03-23-90

Date