## P99000036416

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

SUBJECT: _	BENCHMARK (Proposed o	CASSIC WHOLE corporate name - must include suf	SACE Y TRAIN	SFER GRP INC.
Enclosed is an or	iginal and one(1) copy of the a	_	00002846 -04/22/990 *****87.50 check for :	
☐ \$70.00 Filing Fe		□\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
PECEIVED 99 APR 21 PM 3: 26 UEPAINTER OF STATE OF	Nat Was Was Was Was Was Was Was Was	P. JACOBS me (Printed or typed)  TE 305 W. TE  Address  SEE, FA 323  City, State & Zip		APPROVED FILED  99 APR 21 PH 3: 30
, <del>,</del>	850 Dayt	309 - 438/. ime Telephone number		

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

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## 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:
BENCHMARK CLASSIC WHOLESALE & TRAINSFER CORP INC
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:
4244-SUITE 305 W. TENN St. TALLAHASSEE, FLA.
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:
D. R. JACOBS. 4244-305. W. TENN. ST. TAKAHASSEF, FLA
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: $32304.$
D. R. JACOBS. 4244-305. W. VENN ST. TALGHASSEE, AD
32304. Jul 21,1999
Signature/Incorporator Date
(An additional article must be added if an effective date is requested.)
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 Date