

OFFICE USE ONLY Document #

LEZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

900002876869--6

-05/17/99--01060--009

*****78.75 *****78.75

OFFICE USE ONLY

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

1. CARGONET FREIGHT FORWARD 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

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 checked="" 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

99 MAY 17 PM 1:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

99 MAY 17 AM 11:11
OFFICE OF COMMERCE

Examiner's Initials

ARTICLES OF INCORPORATION
CARGONET FREIGHTFORWARD INC.

ARTICLE I

THE NAME OF THE CORPORATION IS:

CARGONET FREIGHT FORWARD INC.

ARTICLE II

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE III

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THE CORPORATION IS AUTHORIZED TO ISSUE IS 100 SHARES AT \$.00 PAR VALUE.

ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH THE CORPORATION WILL BEGIN BUSINESS IS THE SUM OF \$ 100.00

ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMENCE UPON FILING.

ARTICLE VI

THE STREET ADDRESS IF THE PRINCIPAL OFFICE OF THE CORPORATION IN THIS STATE SHALL BE:

8621 N.W. 54 Street Miami, Fl. 33166

ARTICLE VII

THE NAMES AND ADDRESSES OF THE PERSONS SIGNING THESE ARTICLES ARE:

NAMES	ADDRESS
MIRELLA B. LOPEZ	9824 S.W. 154 Court. Miami, Fl. 33196
PATRICIA MEJIA	19195 Mystic Pointe Dr. #2903 Aventura Fl. 33180

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TALLAHASSEE FLORIDA

ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN TWO OR MORE THAN THREE DIRECTORS. THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF TWO DIRECTORS WHOSE NAMES AND ADDRESSES ARE AS FOLLOWS:

NAMES	ADDRESSES
P?T_D. Patricia MeJia	19195 Mystic Pointe Dr. #2903 Aventura Fl. 33180
VP/S-D Mirella B. Lopez	9824 SW 154 Crt. Miami Fl. 33196

ARTICLE IX

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE, AND THE NAME OF THE INITIAL REGISTERED AGENT AT THAT ADDRESS SHALL BE:

NAME	ADDRESS
Mirella B. Lopez	9824 SW 154 C rt. Miami, Fl. 33196

IN WITNESS WHEREOF, THESE ARTICLES OF INCORPORATION HAVE BEEN EXECUTED THIS 14TH-- DAY OF MAY. 1999

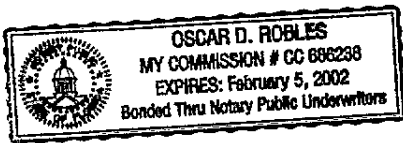
Patricia Smith *Mirella Lopez*
 INCORPORATOR REGISTERED AGENT
 AND INCORPORATOR


HAVING BEEN NAMED TO ACCEPT SERVICES OF PROCESS FOR THE ABOVE STATED CORPORATION AT PLACE DESIGNATED IN THIS CERTIFICATE, I, HEREBY ACCEPT TO ACT IN THIS CAPACITY, AND AGREE TO COMPLY WITH THE PROVISION OF SAID ACT RELATIVE TO KEEPING OPEN SAID OFFICE.

STATE OF FLORIDA)
)
 COUNTY OF DADE) SS

I HEREBY CERTIFY THAT PATRICIA MEJIA S & MIRELLA B. LOPEZ TO ME PERSONALLY KNOWN, THIS DAY ACKNOWLEDGE BEFORE ME THAT THEY EXECUTED THE FOREGOING ARTICLES OF INCORPORATION, AND I FURTHER CERTIFY THAT THE SAID PERSONS MAKING SAID ACKNOWLEDGMENT TO BE THE INDIVIDUAL DESCRIBED IN AND EXECUTED THE SAID INSTRUMENT.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND OFFICIAL SEAL IN SAID COUNTY AND STATE, THIS 14TH - - - - - DAY OF MAY, 1999.---A.D.,




NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

MY COMMISSION EXPIRES:

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99 MAY 17 PM 1:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA