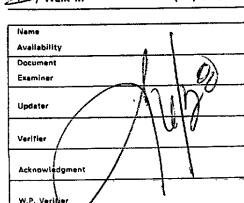
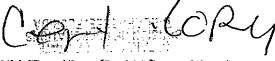
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CORPORATION(S) NAME

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			W 28 AP
Profit) NonProfit	() Amendment	(9: 32
) Foreign	() Dissolution	() Mark
) Limited Partnership) Reinstatement	() Annual Report () Reservation	() Other) Change of Registered Agent
Certified Copy	() Photo Copies	() Certificate Under Seal
) Call When Ready Walk In	() Call If Problem Will Walt	Pick Up) After 4:30 () Mail Out





ARTICLES OF INCORPORATION

of

(ONIRACI CO	ORIEK, FALLO	
	(name of corporation)	
The undersigned subscriber(s) to these Articl corporation under the laws of the State of Flo	es of Incorporation, natural person(s) competer orida.	nt to contract, hereby form a
A	RTICLE I - CORPORATE NAME	
The name of the corporation is:		Ac so
CONTRACT C	OURIER INC.	19 JU
		ASA A
	ARTICLE II - DURATION	8 AM
This composition shall exist nametually unless	s discolved according to Florida law	
This corporation shall exist perpetually unles	s dissolved according to 1-torada law.	9: 32 STATE LORIDA
	ARTICLE III - PURPOSE	
The corporation is authorized to issue	ARTICLE IV- CAPITAL STOCK ne hundred shares (100) of mmon Stock, which shall be designated "Comm	one Shares".
ARTICLE V -	INITIAL REGISTERED OFFICE AND AGENT	•
The street address of the Initial Registered A	gent office and the name of the Initial Registers	ed Agent at that office is:
NAME DELAKTEY Thor	CHE	
ADDRESS 20125 NE 16	_	
CITY A M B	FLORIDA	zip <i>33/7</i> 9
The principal office, if known, or the mailing	g address of the corporation is:	
NAME CONTRACT COU	KIER, INC	
ADDRESS 20 25 NE /	. <i>1</i> .	
CITY HOPTH Miami		712 32179

ARTICLE VI - INITIAL BOARD OF DIRECTORS

NAME DELAUCEU The	RME	
ADDRESS 20125 NE 16	DIACE	
CITY NMB	STATE A	zip <i>3317</i> 9
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZTP
NAME DELANCEY Tho	Signing these Articles of Incorporation are as for RUE	
NAME DELAUCEY Tho ADDRESS 20125 4F 16	RHE	zip 331 79
NAME DELAHIRY Tho ADDRESS 20125 UF 16 CITY UMB	PLACE	
NAME DELAHIRY Tho ADDRESS 20125 HF 16 CITY HM B NAME ADDRESS	PIACE STATE FI	zip 33179
NAME DELAHIRY The ADDRESS 20125 HF 16 CITY HM B NAME ADDRESS CITY	PLACE	
NAME DELAHIRY Tho ADDRESS 20125 HF 16 CITY HM B NAME ADDRESS CITY NAME	PIACE STATE FI	zip 33179
NAME DELAHIRY The ADDRESS 20125 HF 16 CITY HM B NAME ADDRESS CITY NAME ADDRESS	PLACE STATE FL	ZIP 331 79 ZIP
NAME DELAHIRY Tho ADDRESS 20125 HF 16 CITY MM B NAME ADDRESS CITY NAME	PIACE STATE FI	zip 33179
NAME DELAHIEL THO ADDRESS 20125 4F 16 CITY UMB NAME ADDRESS CITY NAME ADDRESS CITY	STATE STATE	ZIP 331 79 ZIP
NAME DELAHIRY THO ADDRESS 20125 UF 16 CITY UMB NAME ADDRESS CITY NAME ADDRESS CITY	PLACE STATE FL	ZIP 331 79 ZIP
NAME DE LAHIEL THO ADDRESS 20125 HF 16 CITY M B NAME ADDRESS CITY NAME ADDRESS CITY	STATE STATE	ZIP 331 79 ZIP
NAME DELAHIEL THO ADDRESS 20125 4F 16 CITY UMB NAME ADDRESS CITY NAME ADDRESS CITY	STATE STATE	ZIP 331.79 ZIP ZIP Orporation this

CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

CONTRACT	COURIEK,	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 gits registered office as indicated in the Articles of Incorporation

at 20125 N.E., 16 D/ACE STATE

A.M. B. F1. 33179

has named Delaycey Thorner

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)