Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	Dease fox the confirmation to 941-371-1272— The corporation already has deposits to be woode but they count open bout account. Thank you
SUBJECT: KOWALSKI TRUCKING Proposed corporate na  Proposed corporate	ume - must include suffix) A. Czerwiuski
Filing Fee Filing Fee & Certificate of Status &	\$78.75 \$\square \\$87.50\$ Filing Fee Filing Fee, Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED
FROM: YOLANDA M. CZERWII. Name (Printed  4308 MEADOWLAND  Addres  City, State	CIECLE  55  6000029413865  -07/26/9901122012  ******70.00 ******70.00
941 - 379 - 1976  Daytime Telepho  NOTE: Please provide the original	L 26 M 9: 55 LARY OF STATE LASSEE, FLORIDA

## 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:	
KOWALSKI TRUCKING, INC.	
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:  5325 SOUTHERLY WAY  SARASOTA, FL 34232	LED 26 M 9: 55
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at an [OO]	ny one time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: YOLANDA M. CZERWINGKI EA PA 4308 MEADOWLAND CIRCLE, SARASOTA, FL	
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Articles of Incorporation are:  ANNA M. KOWALSKI  6325 SOUTHERLY WAY  SARASOTA, FL 34232	
A. Karolsko. — 7/21/99 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 this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further provisions of all stofutes relating to the proper and complete performance of my duties, and I am far obligations of my position as registered agent  Signature Registered Agent  Date of the above stated corporation this capacity. I further provisions of my position as registered agent.	orther agree to comply with miliar with and accept the
Signature/Registered Agent Date Date Date Date Date Date Date Dat	te