# CAPITAL CONNECTION, INC. 097579

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

D. J.S. TransPortalion, Inc.	3000030334939 -11/03/9301005008 *****78,75 ******78,75
2545 W99-25370	Art of Inc. File
	Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search
Signature	Fictitious Owner Search
Requested by:    Compare   1/-3-99   1/-00     Name   Date   Time     Walk-In   Will Pick Up	Vehicle Search



FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 3, 1999

CAPITAL CONNECTION, INC. 417 E. VIRGINIA STREET #1 TALLAHASSEE, FL 32302

SUBJECT: D & S TRANSPORTATION, INC.

Ref. Number: W99000025370

We have received your document for D & S TRANSPORTATION, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the daté of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6973.

Claretha Golden Document Specialist

Letter Number: 299A0005315

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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#### ARTICLES OF INCORPORATION

S & D TRANSPORTATION, INC.

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

#### ARTICLE I NAME

The name of the corporation shall be:

S & D TRANSPORTATION, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

742 ALTON ROAD MIAMI, FL 33139

#### 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 address of the initial registered agent is:

SAM BREJT

742 ALTON ROAD

MIAMI, FL 33139

#### ARTICLE V INCORPORATOR (S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SAM BREJT 742 ALTON ROAD MIAMI, FL 33139

DAVID BREJT 742 ALTON ROAD MIAMI, FL 33139

The undersigned incorporator(s) has(have) executed these Articles

of Incorporation this <u>16TH</u> day of <u>SEPTEMBER</u>, 1999

Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

#### FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

S & D TRANSPORTATION, INC.

2. The name and address of the registered agent and office is:

SAM BREJT	
(Name)	
742 ALTON ROAD	
(P.O. Box <u>not</u> acceptable)	
<u> </u>	
MIAMI FL 33139	
(City/State/Zip)	
(010), 00000, 21p,	

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) Date

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL.