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Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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| , | | Doing so will generate another cover sheet. | | <u>ಹ</u> |
|----------------------|-------|---|---|--------------|
| | To: | | | 83 |
| | | Division of Corporations Fax Number : (850)617-6381 | ASS 755 | -t |
| | From: | Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944 | | PH 1: 35 |
| | | ` , | | |
| N 4 :20 | an - | the email address for this business entity to be used for mual report mailings. Enter only one email address please | future | |
| tid 5 | an - | the email address for this business entity to be used for | future . ** | |
| 2018 FEB -4 PN 4: 20 | Ew | the email address for this business entity to be used for mual report mailings. Enter only one email address please | · • • · · · · · · · · · · · · · · · · · | |
| -4 PM | Ew | the email address for this business entity to be used for inval report mailings. Enter only one email address please mail Address: FLORIDA PROFIT/NON PROFIT CORPORATION | · • • · · · · · · · · · · · · · · · · · | |
| HJ 7- | Ew | the email address for this business entity to be used for inval report mailings. Enter only one email address please mail Address: FLORIDA PROFIT/NON PROFIT CORPORATION SKY TRUCKING CORP | · • • · · · · · · · · · · · · · · · · · | , |

Electronic Filing Menu

Estimated Charge

Corporate Filing Menu

Help

\$78.75

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page 1

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

| and an analysis of the corporation is |
|---|
| 5 Ly THUCKING COPP |
| ARTICLE II PRINCIPAL OFFICE: |
| The principal street address and mailing address is: |
| 4821NW13St |
| 4821NW13St Loudenhill FZ 33313 |
| r÷- |
| ARTICLE III SHARES: The number of shares of stock is: |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: |
| Frandy Eugene (P) |
| |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: |
| 4821NW13St FF |
| Laudenhill FL 33313 |
| Frandy Eugene |
| ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: |
| - Franch Eugene |
| |
| 4821NW135+ Loudenhill, F1 33313 |

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Required Signatures:

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.