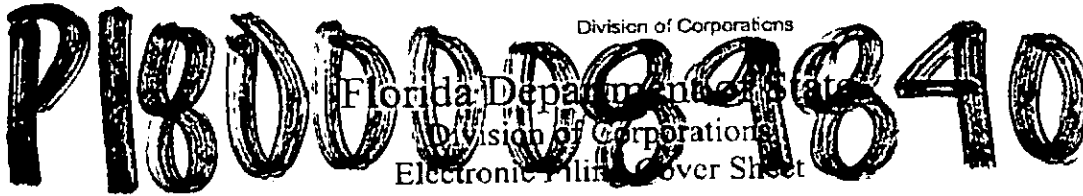


10/30/2018



**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.

((H18000313758 3)))



H180003137583ABC3

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : THREE K FAST CARRIER SERVICES INC  
Account Number : I20180000033  
Phone : (305)805-3516  
Fax Number : (305)887-5844

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: JBENTIES1979@gmail.com

**FLORIDA PROFIT/NON PROFIT CORPORATION  
AD DURAN LOGISTIC CORP**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

10 OCT 31 2018

Electronic Filing Menu

Corporate Filing Menu

Help

(H180003137583)

**COVER LETTER**

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** AD DURAN LOGISTIC CORP  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** IBENIES DURAN VINALS  
Name (Printed or typed)  
400 W 1ST AVE #13  
Address  
HIALEAH, FL 33010  
City, State & Zip  
786-879-6430  
Daytime Telephone number  
IBENIES1979@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

18 OCT 31 2 13 PM '18

**NOTE: Please provide the original and one copy of the articles.**

(H180003137583)

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME** AD DURAN LOGISTIC CORP

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

400 W 1ST AVE APT 13

HIALEAH, FL 33010

Mailing address, if different is:

400 W 1ST AVE APT 13

HIALEAH, FL 33010

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: IBENIES DURAN VINALS. PRES

Address: 400 W 1ST AVE APT 13

HIALEAH, FL 33010

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

18 OCT 30 11:13

(H180003137583)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: IBENIES DURAN VINALS  
 Address: 400 W 1ST AVE #13  
HIALEAH, FL 33010

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: IBENIES DURAN VINALS  
 Address: 400 W 1ST AVE #13  
HIALEAH, FL 33010

RECEIVED  
 OCT 30 2018

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 10-30-2018 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

[Signature]  
 Required Signature/Registered Agent

10-30-2018  
 Date

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.

[Signature]  
 Required Signature/Incorporator

10-30-2018  
 Date