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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : TAX 4 TRUCKS INC Account Number : I20190000100 Phone : (305)764-3080 : (305)675-6155 Fax Number

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

JORGE@TAX4TRUCKS.COM Email Address:

## FLORIDA PROFIT/NON PROFIT CORPORATION **BLUE LINE TRANSCARGO INC**

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

TIÇLE IL PRI	VCIPAL OFFICE Principal street address	Ma	nilina sadovske it d	ittiscent ic:
20 SW 37TH ST			Mailing address, if different is:	
AMI, FL 33155				
	that P	<del> </del>		
TICLE III PUR purpose for which	POSE  the corporation is organized is: ANY AN	D ALL LAWFUL BUS	SINESS	•
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From: Tax 4 Trucks

Name an	nd Title:	Name and Title:
Address		Address:
	***	
ARTICLE VI The name and F	REGISTERED AGENT lorida street address (P.O. Box NOT acceptal	ole) of the registered agent is:
Name:	LILLIAM PAYRET DEL RIO	<del></del>
Address:	7520 SW 37TH ST	
	MIAMI, FL 33155	
ARTICLE VII	INCORPORATOR	2022 MAR -4 PH 1: 15
The name and ac	ddress of the Incorporator is:	
Name:	LILLIAM PAYRET DEL RIO	
Address:	7520 SW 37TH ST	일 경우 다
	MIAMI, FL 33155	
liffective date, if	EFFECTIVE DATE:  other than the date of filing: late is listed, the date must be specific and o	
Note: If the date	inserted in this block does not meet the appli- effective date on the Department of State's rec	cable statutory fifing requirements, this date will not be listed as ords.
Having been nan certificate, I am f	ned as registered agent to accept service of proc familiar with and accept the appointment as re	cess for the above stated corporation at the place designated in this gistered agent and agree to act in this capacity
	Lilliam Paysat Dol Rio Required Stenature/Registered Agent	2/15/2022
	-	
document to the i	Department of State constitutes a third degree	
	Lilliam Payset-Del Riv	2/15/2022
Required Signatu	ire/Incorporator	Date Date