P11000035575

(Requestor's Name)				
(Address)				
(Address)				
(City	//State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				

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SECRETARY OF STATE

T Burch ARR 1.1 2811

COVER LETTER

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

SUBJECT: CARGO DEPOT, INC.		
(PROPOSED CORPORA	ATE NAME – <u>MUST INC</u> I	LUDE SUFFIX
Enclosed are an original and one (1) copy of the art	icles of incorporation an	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
	ADDITIONAL C	
	e (Printed or typed)	
3300 NW North River D	Address	
Miami Fl 33142	, State & Zip	
305- 634-0081 Daytime 1	Telephone number	· · · · · · · · · · · · · · · · · · ·
4 DMEGA CODE DO 7 @ yah C E-mail address: (to be use	oo (: 0m)	notification)

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



RECEIVED 11 APR | | AM 10: 54 PLYSION OF CORPORATIONS

April 4, 2011

OSNEL MENDEZ 3300 NW NORTH RIVER DR MIAMI, FL 33142

SUBJECT: CARGO DEPOT INC. Ref. Number: W11000018918-

We have received your document for CARGO DEPOT INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

Please return the corrected 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) 245-6928.

Tim Burch Regulatory Specialist II **New Filing Section**

Letter Number: 611A00008096

www.sunbiz.org

Division of Corporations P.O. ROV 6227 Tallahassas Florida 22214

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

ARTICLE I The name of the cor	NAME CARGO DEPOT INC.	DED S	SHIPPING INC
ARTICLE II	PRINCIPAL OFFICE		•
	Principal street address	Mailing	address, if different is:
	300 NW North River Dr.		
М	iami Fl 33142		•
***			he had a
ARTICLE III I	PURPOSE		700
	nich the corporation is organized is:		
ENGAGE IN	ALL LAWFULL AND UNLISENCED E	BUSINESS	A P
			多 3 可
			/ 多利 4 声
			70 3 0
ARTICLE IV	<u>Shares</u>		
The number of share	es of stock is: 1000		2 T
ADDICT P II	INITIAL OFFICERS AND/OR DIRECTORS	5	Sm Ga.
	le: Osnel Mendez	? Name and Title:	,
Address:	3300 NW North River Dr.		
	Miami Fl 33142		
Ni d Tix	e oshermendez	Name and Title:	
Name and 110 Address:	3300 NW NORTH RIVER	Address:	
Addiess.	Dr. MIANI F1: 33142	Additess.	
	le:		
Address:		Address:	
		· · · · · · · · · · · · · · · · · · ·	
	REGISTERED AGENT		
	ida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name: Address:	Osnel Mendez		
Addiess.	3300 NW North River Dr. Miami Fl 33142		
	Might Et 35 142		
	INCORPORATOR		
	ress of the Incorporator is:		
Name:	Osnel Mendez		
Address:	3300 NW North River Dr.		•
	Miami Fl 33142		
	d as <u>regis</u> tered agent to accept service of process		
this certificate, I do	Jamiliar with and accept the appointment as regi	stered agent and agree to	act in this capacity
KI.			1 - 1
× 9707			Y 93133111
// . "	Required Signature/Registered Agent		Date
I submit this document	nent and affirm that the facts stated herein are	true. I am aware that th	e false information submitted in a
	parament of State constitutes a third degree felony		
Anti			•
V Style			103122111
-///	Required Signature/Incorporator		Date