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2011 AUG 29 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

J. Shivers AUG 30 2011

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SANTIAGO CARGO EXPRESS, CORP.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

LUPE FERNANDEZ

Name of Person

SANTIAGO CARGO EXPRESS, CORP.

Firm/Company

9-16 37th Ave.

Address

Long Island City, NY 11101

City/State and Zip code

contact@santiagocargoexpress.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LUPE FERNANDEZ

Name of Person

at (917) 553 6000

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

2001 AUG 29 AM 10:30
TALLAHASSEE, FL 32314
FILING SECTION

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Santiago Cargo Express, Corp.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Embarque Santiago Cargo Express, Corp.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York 3. 26 4560635
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/27/2009 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 9 -16 37th Ave. Long Island City, NY 11101
(Principal office address)

9-16 37th Ave. Long Island City, NY 11101
(Current mailing address)

8. To engage in any lawful act for which Corps. may be organized under the Gral Corp. Law of NY and permitted under the Florida Business Corp. Act.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

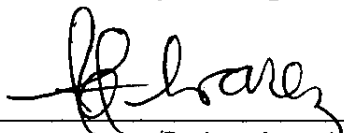
Name: THELMA ALVAREZ

Office Address: 2603 NW 10th Ave. Suite 205

Miami, Florida 33127
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
AUG 29 AM 10:30
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
MIAMI, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Lupe Fernandez

Address: 9-16 37th Ave. Long Island City, NY 11101

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Lupe Fernandez

Address: 9-16 37th Ave. Long Island City, NY 11101

Vice President: Lupe Fernandez

Address: 9-16 37th Ave. Long Island City, NY 11101

Secretary: Lupe Fernandez

Address: 9-16 37th Ave. Long Island City, NY 11101

Treasurer: Lupe Fernandez

Address: 9-16 37th Ave. Long Island City, NY 11101

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. Lupe Fernandez - President

(Typed or printed name and capacity of person signing application)

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of SANTIAGO CARGO EXPRESS, CORP. was filed on 03/27/2009, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



FILED
24 AUG 29 AM 10:30
SECRETARY OF STATE
ALBANY, NEW YORK

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 18th day of July two
thousand and eleven.*

First Deputy Secretary of State