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SECRETARY OF STATE



COVER LETTER

Division of Co	orporations		
SUBJECT:	HM TERMINA	RS TRANSPORT	Corp.
	Name of co	orporation - must inclu	de suffix
Dear Sir or Madam:			
"Certificate of Existen		Good Standing" and ch	n to Transact Business in Florida," neck are submitted to register the
	spondence concerning t		ving:
	FUNARD FISC	HE771	
		Name of Person	
	m INTERNAT	IONAL TRAN	SPORTATION, INC
1/0-0	9	Firm/Company	
	ROUTE SO	UTH	
		/ 1001 C33	
	SECIN, NE	Wiersey	off30
	Cr	ty/State and Zip code	
	E-mail address: (to	he used for future ann	usal report notification)
			report normeution,
For further information	n concerning this matter	r, please call:	
LEONARD FISCH	/€17 / at (732, 51	10-4648
Name of Perso		Area Code & Dayti	ime Telephone Number
New Filing Sec Division of Co Clifton Buildir	orporations ng e Center Circle	Ne Div P.C	AILING ADDRESS: w Filing Section vision of Corporations D. Box 6327 llahassee, FL 32314
Enclosed is a check for	the following amount:		
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee Certificate of Sta		

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 <i>H</i> -	orporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
(Enter name of co	orporation; must include "INCORPORATED," "COMPANY," "CORPORATION," orp," "Inc," "Co," or "Corp.")
	HMTT CORP.
(If name unavaila	#MTT Co RP. ble in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. M EW	Jensey 3. 45-5151653 under the law of which it is incorporated) (FEI number, if applicable)
	, t
4	9 12 5. ARRETURE of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual")
(Date	of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
o	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7.	485B ROUTE 1 SOUTH ISEIN, NJ 08830
	(Principal office address)
	(Current mailing address)
8	intermobile Trucking.
(Purpose(s	of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and stree	t address of Florida registered agent: (P.O. Box NOT acceptable)
Name:	LANNARN FISCHETTI
Office Address:	2101 WEST 33RD ST.
	LEONARD FISCHETTI 2101 WEST 33RD ST. JACKSONVIlle, FL 328, Florida 32208 (City) (Zip code)
	(City) (Zip code)
10. Registered ag	gent's acceptance:
Having been nam	ed as registered agent and to accept service of process for the above stated corporation at the place
	application, I hereby accept the appointment as registered agent and agree to act in this capacity. Omply with the provisions of all statutes relative to the proper and complete performance of my
duties, and I am f	amiliar with and accept the obligations of my position as registered agent.
	Genal Fischett
	(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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: Address: ____ Director: CHARLES CONNORS Address: 329 HILLSIAE AVE NORTH OCEAN DRIVE BUILDING A, APT 190413 **B. OFFICERS** C00 CHARLE President: 329 HILLSIDE AVENUE WESTFIELD, NT 07090 Vice President: ROBERT GIL DERSLOE VE NORTH OCEAN DRIVE SINGER ISLAND, FL 33404 Secretary: LEONARD GISCHETTO

Address: 26 SADOLE COURT MONROE TWP, NJ 08831 ____ Treasurer: ___ Address: ______ NOTE: If necessary, you may attach an addendum to the application listing additional officers and or directors. 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.

LEONARD FISHETTI ENP+C. FO (AND SECRETARY

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

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES

H&M TERMINALS TRANSPORT CORPORATION

0400489263

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on April 27, 2012.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Leonard M. Fischetti
H&M International Transporation
485 Us Highway 1 S
Iselin, NJ 08830 3009

I further certify that as of the date of this certificate, no amendments have been filed.

THE STATE OF THE S

Certification# 127002031

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 3rd day of January, 2013

54.0

Andrew P Sidamon-Eristoff State Treasurer 13 JAN -9 AM II: 20 Secretary de State

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