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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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TORETARY OF STATE

* claur

Corporate Filing Solutions Inc. PO BOX 540842 Flushing, NY 11354

Tel: 718-353-7703 Fax: 718-874-0028

Date: June 3, 2015

Department of State
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Wynn Expedited Logistics Inc.

Please file this Articles of Incorporation and return a certified copy to our office as soon as possible. Enclosed please find:

- 1. Articles of Incorporation (original)
- 2. Good standings from NY
- 3. Check for \$78.75

Please return the certified copy to my PO BOX

Thank you,

John Park @ Corporate Filing Solutions

COVER LETTER

TO: New Filing Secti Division of Corp			
_{SUBJECT:} Wynn	Expedited Logist	tics, Inc.	
	Name of corporatio	n - must include suffix	
Dear Sir or Madam:			
"Certificate of Existence	on by Foreign Corporation fo," or "Certificate of Good Sta corporation to transact busin	inding" and check are sub	
Please return all correspo	ondence concerning this matte	er to the following:	
John Park			
	Name of	Person	_
Corporate Filin	g Solutions Inc.		
	Firm/Co	npany	
PO BOX 5408	42		
	Add	ress	
Flushing, NY 1	1354		
	City/State	and Zip code	
cfsjohn@hotmai			
	E-mail address: (to be used	for future annual report n	notification)
For further information c	oncerning this matter, please	call:	
John Park	718	353-7703	
Name of Person	at (Area	353-7703 Code & Daytime Telepho	one Number
			, vanisti
New Filing Section Division of Corportion Building 2661 Executive Callahassee, FL	Center Circle 32301	MAILING AI New Filing Se Division of Co P.O. Box 6327 Tallahassee, Fi	ction rporations
Enclosed is a check for th	•	\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

•	pedited Logistics, Inc.		
	orporation; must include "INCORPORATED forp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	
IIIC., CO., C	orp, me, co, or corp.)		
			美国等 了
(I.C. '1	11.1 11.1 11.1		502
		e adopted for the purpose of transacting business	in Florida)
New Yor			(m)
•	y under the law of which it is incorporated)	(FEI number, if applicable)	<u> </u>
March 4,	2015	Perpetual	हेंद्राल 🗲
·	of incorporation)	(Duration: Year corp. will cease to exist or "	perpetual")
June 3, 2	2015		
		in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.	1502, F.S., to determine penalty liability)	
164-02 No	ORTHERN BLVD. FLUSH	IING, NEW YORK, 11358	
	(Principal office ad-	dress)	
164-02 NO	DRTHERN BLVD. FLUSHIN	NG. NEW YORK, 11358	
	(Current mailing add	·····	
		,	
. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	
Name:	Megan Lee		
	10891 NW 122nd Stree	+	
office Address:	10091 1444 122110 31166	 	
	Medley	, Florida 33178 (Zip code)	
	(City)	(Zip code)	
	ent's acceptance:		4 .4 .
		vice of process for the above stated corpord tment as registered agent and agree to act	
		relative to the proper and complete perfor	
	familiar with and accept the obligations		
		_	
		7	
	Metas		
_	(Registered agent's s	signature)	

10. 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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Megan Lee
Address: 10891 NW 122nd Street
Medley FL 33178
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President:
Address:
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12Signature of Director or Officer
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.
Megan Lee, 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 WYNN EXPEDITED LOGISTICS, INC. was filed on 03/04/2015, 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.

I further certify that no other documents have been filed by such corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 13th day of May two thousand and fifteen.

Anthony Giardina

Executive Deputy Secretary of State

Duting Sicidina

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