

Oct. 19. 2015 10:32A

Incorporation Services, Ltd.

N. 8729

P. 1

F15000004616

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6188

SECOND SUBMISSION PLEASE
FILE WITH ORIGINAL DATE
OF SUBMISSION AS FILE

From:

Account Name : INCORPORATION
Account Number : I20050000052
Phone : (850) 656-7956
Fax Number : (850) 656-7953

DATE, THANKS!

10/14/15

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

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FOREIGN PROFIT/NONPROFIT CORPORATION

iGPS Logistics, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

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N. Culligan OCT 20 2015

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Incorporating Services, LTD.

No. 8729 P. 4

iGPS LOGISTICS LLC
225 E. ROBINSON STREET, SUITE 200
ORLANDO, FLORIDA 32801

October 15, 2015

Florida Department of State
Division of Corporations
Registration Section
P.O. Box 6527
Tallahassee, FL 32314

Re: Consent to Use of Name – iGPS Logistics, Inc.

Ladies and Gentlemen:

The undersigned, Greg Anderson, Chief Financial Officer of iGPS Logistics LLC, hereby consents to the use of the name iGPS Logistics, Inc., for the purposes of qualifying to do business within the State of Florida.

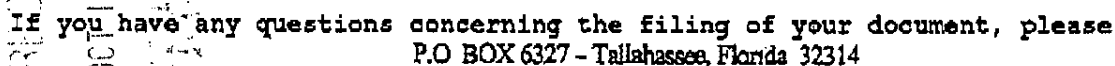
Very Truly Yours,

iGPS LOGISTICS LLC

By: 

Name: Greg Anderson

Title: Chief Financial Officer



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Oct. 19, 2015 10:32AM 10/19/2015 10:32AM FAX 2/002 Fax Service No. 8729 P. 3



call (850) 245-6051.

Neysa Culligan
Regulatory Specialist II

FLORIDA DEPARTMENT OF STATE
FAX 245-6051
Division of Corporations
Letter Number: 715A00021819

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P.O BOX 6327 - Tallahassee, Florida 32314

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. IGPS Logistics, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 47-5246522
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. October 1, 2013 5. _____
(Date of incorporation) (Date of duration, if other than 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. c/o National Registered Agents, Inc., 160 Greentree Drive, Dover, Delaware 19904
(Principal office address)
- _____
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Robert Lieberman
- Office Address: 225 E. Robinson Street, Suite 200
- Orlando, Florida 32801
(City) (Zip code)

9. 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)

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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Robert Lieberman
Address: 225 E. Robinson Street, Suite 200
Orlando, FL 32801

Vice Chairman: Jeffrey Lieberman
Address: 225 E. Robinson Street, Suite 200
Orlando, FL 32801

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Jeffrey Lieberman & Robert Lieberman (Co-Chief Executive Officers)
Address: 225 E. Robinson Street, Suite 200
Orlando, FL 32801

Vice President: _____
Address: _____

Secretary: Greg Anderson
Address: 225 E. Robinson Street, Suite 200, Orlando, FL 32801

Treasurer: Greg Anderson
Address: 225 E. Robinson Street, Suite 200, Orlando, FL 32801

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

12. _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Gregory Anderson, CFO
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IGPS LOGISTICS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF OCTOBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IGPS LOGISTICS, INC." WAS INCORPORATED ON THE FIRST DAY OF OCTOBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



5839691 8300

SR# 20150495538

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 10233120

Date: 10-14-15