# F1600000967

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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FILED

16 NOV -4 PM 2: 46

SECRETARY OF STATE
SECRETARY OF STATE

D. SCOTT NOV 4 2016



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 25, 2016

BARRY E. HAIMI, ESQ 8201 PETERS RD, SUITE 1000 PLANTATION, FL 33324

SUBJECT: BIG MARK TRANSPORT, INC.

Ref. Number: W16000072441

2016 NOV -4 PH 12: 45
SECRETARY OF STATE
AND AHASSEE, FLORIDA

We have received your document for BIG MARK TRANSPORT, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE RESUBMIT PAGE 4 OF 4 OF APPLICATION.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 316A00022835

16 NOV -4 PH 2: 46
SECRETARY OF STATE
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## **COVER LETTER**

TO:	Registra Division		ction porations							
	E		RK TRANSPORT,	INC.						
SUBJ	JECT: _		Name	of corporat	tion -	· must include suffix				
Dear S	Sir or Mad	lam·		•						
"Certi	ficate of I	Existenc		e of Good S	Stand	Authorization to Transa ling" and check are su s in Florida.				
Please	return all	corresp	ondence concerr	ing this ma	itter 1	to the following:				
Barry	E. Haimo,	Esq.								
				Name	of P	erson				
Haimo	Law									
				Firm/C	Comp	any				
8201 I	Peters Rd, S	Suite 100	00							
			<del>.</del>	Ad	ddres	S				
Planta	tion, Floric	la 33324								
				City/Stat	te an	d Zip code				
barry@	@haimolaw	.com						_		_
			E-mail addres	s: (to be us	ed fo	r future annual report	notification)			
For fu	rther info	rmation	concerning this r	natter, plea	se ca	11:		TAL SEC	5	
Barry	E. Haimo,	Esq.		954		228-3369		产品	<u>S</u>	T
	Name o	of Perso	n	at ( Area (	Code	_) Daytime Telep	hone Numbe	SSE	+	ナートド
								프유 고요	뫋	Ċ
	STREE	T/COU	RIER ADDRES	SS:		MAILING A	ADDRESS:	LORIDA	2: 46	
	Registra					Registration Section Division of Corporations				
	Division of Corporations Clifton Building		P.O. Box 6327							
	2661 Ex Tallaha		Center Circle 32301			Tallahassee, I	FL 32314			
Enclos	sed is a ch	eck for	the following am	ount:						
<b>3</b> \$7	0.00 Filin	g Fee	S78.75 Filir Certificate	-		\$78.75 Filing Fee & Certified Copy		Filing Forces	tatus	&

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

OROBINAN IK	EIGN CORPORATION TO TRANSAC ANSPORT, INC.				
(Enter name of co	rporation; must include "INCORPORATE tp," "Inc," "Co," or "Corp,")	D." "COMPANY," "CORPORATION	u commercial de la constant		
(If name unavaila	ole in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting	business in Florida)		
Georgia		373/177767			
11/17/2010	under the law of which it is incorporated)				
(Date	of incorporation)	5. (Date of duration, if other the	(Date of duration, if other than perpetual)		
	(Current ma	iling address, if different)			
Name and stree	t address of Florida registered agent; (I	P.O. Box NOT acceptable)	·		
Name and stree	t address of Florida registered agent: (I Roben Linder	P.O. Box NOT acceptable)	16   SECF TALL		
Name:		P.O. Box NOT acceptable)	NOV CRET		
Name:	Roben Linder	33317	EΩ		
Name:	Roben Linder 6700 Nova Dr., Apt. 202		NOV -4 PN CRETARY OF ST LLAHASSEE, FL		
Name:  office Address:  Registered age faving been namesignated in this arther agree to control of the control	Roben Linder 6700 Nova Dr., Apt. 202 Davie	33317 Florida	NOV -4 PN 2: 400 CORETARY OF STATE at capacity this capacity to act in this capacity to act in the capacity to act		

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:

11. Names and business addresses of officers and/of directors.	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Marcus Fields	
Director: 2784 Summit Pkwy SW, Atlanta, Georgia 30331	
Director:	
Address:	
B. OFFICERS	
Marcus Fields	
President: 2784 Summit Pkwy SW, Atlanta, Georgia 30331	
Address:	
Vice President:	TAL SEC
Address:	AR S n
	ASS.
Marcus Fields	
Secretary:	877 877 877
Address:	5 f
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing	additional officers and/or directors.
12. Mu 1) 100	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 1)	above) affirms that the facts stated herein
are true and that he or she is aware that false information submitted in a docu	
a third degree felony as provided for in s.817.155, F.S.	

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

#### Addendum

11. Names and business addresses of officers and/or directors (continued):

CEO: Marcus Fields

Address: 2784 Summit Pkwy SW, Atlanta, GA 30331

CFO: Telena Saxton

Address: 382 Cativo Dr SW, Atlanta, GA, 30311

FILED
FILED

Control Number: 10080139

### STATE OF GEORGIA

**Secretary of State** 

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### **BIG MARK TRANSPORT. INC**

#### a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date
Form Number

:13549129 :11/17/2010 :Georgia :10/27/2016 :211



Brian P. Kemp Sccretary of State