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## COVER LETTER

	• "						
TO:	Registration Section Division of Corporations						
SUBJE	ECT: dexFreight, Inc.						
		Name of corporat	ion - m	ust include suffix			
Dear Si	r or Madam:						
"Certifi	closed "Application by Fo cate of Existence," or "Ce eferenced foreign corpora	rtificate of Good S	tanding	" and check are subn			••
Please r	eturn all correspondence	concerning this ma	tter to tl	ne following:			
Douglas	L. O'Keefe						
		Name	of Pers	 on		203	
O'Keefe Law, P.A.						)021 FEB	ī
		Firm/C	ompany	7	••	$\sim$	
IIII Br	ickell Avenue, Suite 1300					S	1
		Ac	ldress		100	<del></del>	
Miami,	FL 33131					.;·	
		City/Stat	e and Z	ip code	<del></del>		
dokeefe	@dokeefelaw.com						
	E-mail	address: (to be use	ed for fu	ture annual report no	tification)		
For furt	her information concerning	g this matter, pleas	se call:				
Douglas O'Keefc at ( 305 ) 213-9029							
	Name of Person	Area C	Code	Daytime Teleph	one Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Please m	<u> </u>		□ \$78	STATE 3.75 Filing Fec & rtified Copy	\$87.50 Fill Certificate	of St	

## 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.

DEXFREIGHT,  (Enter name of co	orporation; must include "INCORPORATED,"	"COMPANY," "CORPORATION."			
	orp," "Inc," "Co," or "Corp.")	Jennini, Jenniem,			
(If name unavaila	ble in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Florida)			
Dalawara 92 2244102					
(State or country under the law of which it is incorporated)		(FEI number, if applicable)			
9/21/2018	5				
(Date	of incorporation) 5	(Date of duration, if other than perpetual)			
3	1/2021				
1401 Sawgrass Co	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 Orporate Pkwy, Sunrise FL 33323				
	(Principal office	street address)			
	(Current mailing	address, if different)			
Name and stree	t address of Florida registered agent: (P.O.)	Box NOT acceptable)			
Name:	Douglas L. O'Keefe, Fsq.				
Tice Address:	1111 Brickell Avenue, Suite 1300	<del></del>			
	Mīami	, Florida			
	(City)	(Zip code)			
ving been name signated in this other agree to co	application, I hereby accept the appointme	of process for the above stated corporation at the place nt as registered agent and agree to act in this capacity. Itive to the proper and complete performance of my du- ion as registered agent.			
-	Douglas O'Keefe Registered agent's bign	ı			
	Registered agent's <b>G</b> en	ature)			

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

a. directors									
` <b>■</b> Chairman	Name:	□ Chairman	Name: Hector Hernandez						
	Address: SUNCISCIFU 33323	□Vice Chairman		1401 C					
□Director	SUNTIR , FL 33323	■Director		SUNDER L 33323					
□President		□President							
□Vice President		□Vice President							
☐ Secretary	□Treasurer	□Secretary		Treasurer					
□Other	Other	■Other Assistant	Secretar	Other					
□Chairman	Name: Adrian Giannini	□ Chairman	Ra Name:	ijat Rajbhandari					
□Vice Chairman	Address: 1401 Sawgrass Corporate Pkw	□Vice Chairman	Address:	1401 Sawgrass Corporate Pkwy,					
Director	·	Director							
□President		☐ President							
□Vice President		□Vice President		2021 TE					
☐ Secretary	□Treasurer	<b>■</b> Secretary		Treasurer					
Other	Other	Other							
□Chairman	Jim Handoush	□ Chairman	Lu Name:	cianoi Bonaldo-					
□Vice Chairman	Address: 1401 Sawgrass Corporate Pkw SunN3e FL 33323	□ Vice Chairman	Address:	JUNNSE FL 33 3 23					
□Director	SUNN SEFL 33373	<b>■</b> Director							
President		□President		· · · · · · · · · · · · · · · · · · ·					
□Vice President		□Vice President							
☐ Secretary	□Treasurer	Secretary		☐Treasurer					
□Other	Other	□Other		□Other					
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the unity of the firm of State Annual Report form.									
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 of she is aware that false information submitted in a document to the Department of State constitutes a third degree falous as provided for in									

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 of 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.

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DEXFREIGHT, 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 SEVENTEENTH DAY OF FEBRUARY, A.D. 2021.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DEXFREIGHT,

INC." WAS INCORPORATED ON THE ELEVENTH DAY OF OCTOBER, A.D. 2018:

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.  $\stackrel{\sim}{\omega}$ 

Authentication: 202534762

Date: 02-17-21

7066190 8300 SR# 20210500054