F2200005742

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
<u> </u>	Office Use Onl		



03/06/22--01038--018 **78.75

2522 S - - 6 P'' 7: 20

-7

S. FRANKLIN SFP 1 3 2022

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: UNIVERSAL INTERMODAL SERVICES, INC.

Name of corporation - must include suffix

Dear Sir or Madam:

•

•

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

KAELA CARNES

	Name	of Person	
UNIVERSAL INTERMODAL	SERVICES, INC.		
Firm/Company			1022
12755 E 9 MILE ROAD			
	Ad	dress	5
WARREN, MI 48089			P
**************************************	City/State	and Zip code	
KCARNES@UNIVERSALLO	GISTICS.COM		
—		d for future annual report notification)	
KAELA CARNES	at (⁸⁰⁰)	
Name of Person	at (Area C		
STREET/COURIE Registration Section Division of Corporat The Centre of Tallah 2415 N. Monroe Stro Tallahassee, FL 323	ions Jassee eet, Suite 810	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the f Please make check payable to: S70.00 Filing Fee	ollowing amount: FLORIDA DEPARTME \$78.75 Filing Fee & Certificate of Status	🖸 \$78.75 Filing Fee & 🛛 \$87.50 H	ate of Status &

٦

ī

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.

UNIVERSAL INTERMODAL SERVICES, INC. 1.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co." or "Corp.")

(If name unavaila	able in Florida, enter alternate corporate name ade	pted for the purpose of transacting b	usiness in Florid
MICHIGAN	3.	<u>-</u>	
(State or countr	33	(FEI number, if applic	able)
06/29/1992	of incorporation) 5.		
(Date	of incorporation)	(Date of duration, if other thar	i perpetual)
	(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502		
1700 FLAG STR	EET; JACKSONVILLE, FL 32209		
	(Principal office	street address)	
12755 E 9 MILE	ROAD: WARREN, MI 48089		
	(Current mailing a	ddress, if different)	2012
Name and stree	at address of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)	100
Name:	CORPORATE CREATIONS NETWORK INC	<u> </u>	5
Office Address:	801 US HIGHWAY I	_	PII
	NORTH PLAM BEACH	, Florida ³³⁴⁰⁸	~
	(City)	(Zip code)	C.

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.

Ryan Mulligan, Special Secretary (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.

A. DIRECTORS

3

□ Chairman	Name:	□Chairman	JEFFREY HINKLE
□Vice Chairman	Address:	□Vice Chairman	Address:
Director	WARREN, MI 48089	□Director	
President		President	
DVice President		EVice President	
Secretary	Treasurer	□Secretary	Treasurer
□Other	Other	Other	Other
□Chairman	STEVEN FITZPATRICK	□Chairman	VIOLETA GOLEMATIS
□Vice Chairman	12755 E 9 MILE ROAD	□Vice Chairman	Address:
Director	WARREN, MI 48089	Director	WARREN, MI 48089
□President		□President	
□Vice President		□Vice President	
Secretary		Secretary	Treasurer S
Other	Other	Other	□Other
Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director		Director	
□President		DPresident	
□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 index when filing your Florida Department of State Annual Report form.

a 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. VIOLETA GOLEMATIS - TREASURER



This is to Certify That

UNIVERSAL INTERMODAL SERVICES, INC.

was validly incorporated on June 29, 1992 as a Michigan DOMESTIC PROFIT CORPORATION, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by electronic transmission Certificate Number: 22081399507

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 24th day of August , 2022.

-6 -

2

Linda Clark

Linda Clegg, Director Corporations, Securities & Commercial Licensing Bureau

Verify this certificate at: URL to eCertificate Verification Search http://www.michigan.gov/corpverifycertificate.