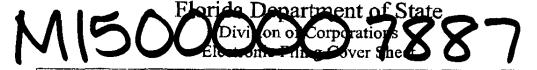
Division of Corporations

Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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page. Doing so will generate another cover sheet.				
To:		25	007	
	Division of Corporations Fax Number : (850)617-6383	1885	2	
From:	• •	ند کتا دیکی		
	Account Name : LAW OFFICES OF CHARO BOLAN	os,⊆P∴A	ထ	

Account Number : I20150000078 Phone : (305)206-8404 Fax Number : (786)732-0184

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

Email Address: MADLANOS @ OTH LOGISTICS, COM

Foreign Limited Liability Company
OTH Logistics Limited Liability Company

Certificate of Status	1
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Page Count	03
Estimated Charge	\$130.00

OCT OF 2015 J. HARRIS

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COVER LETTER

TO:	Registration Section Division of Corporation	ns	,		·			
SUBJI	OTH LOGISTICS	LIMITED LIABILITY CON	MPANY					
5-20.	<u> </u>		Limited Liability	Company				
The en Exister	closed "Application by Fo	reign Limited Liability Comed to register the above refer	pany for Authoriza enced foreign limi	ntion to Tra ted liabilit	ansact Business in Florida," Cert y company to transact business in	ificate of n Florida		
Please	return all correspondence	concerning this matter to the	following:					
	Michael Bolan	os	•					
		N	ame of Person	· · · · · · · · · · · · · · · · · · ·				
•	OTH Logistics	Limited Liability Company						
	••• <u>••</u>	F	irm/Company		— · · · · · · · · · · · · · · · · · · ·			
	4515 Main Street, Unit 2073							
	Address							
	Jupiter, FL. 334	158						
		City/S	tate and Zip Code	_ 				
	mbolanos@othio	gistics.com						
		E-mail address: (to be use	d for future annual	report not	lification)			
For fur	ther information concerning	g this matter, please call:						
	Michael Bolanos		908 at (358-63°	79			
	Name o	f Contact Person	Area Code	Day	time Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle sec, FL 32301			
Enclose	ed is a check for the follow \$125.00 Filing Fee	ing amount: \$\mathbb{\mtx}\mtx\\\\\\\\\\\\\\\	□ \$155,00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certific of Status & Certified Copy	ate		

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October 2, 2015

FLORIDA DEPARTMENT OF STATE

LAW OFFICES OF CHARO BOLANOS, P.A. Division of Corporations

SUBJECT: OTH LOGISTICS LIMITED LIABILITY COMPANY

REF: W15000065511

2015 OCT -2 AM 8: 26 SECRETARY OF STATE TALLAHASSEE PLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You can only list one state in line 2.,

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.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H15000235582 Letter Number: 715A00020826

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

		H' FLORIDA		
	CTION 605,0902, FLORIDA S USINESS IN THE STATE OF I		S IS SUBMITTED TO REGIST	TER A FOREIGN LIMITED LIABILIT
OTH Logistics Limited	d Liability Company			·
(Name of For	reign Limited Liability Comp	pany; must include "Limited	Liability Company," "L.L.C	.," or "LLC.")
Liability Company," "L.L.C.	ilternate name adopted for th	e purpose of transacting bus	iness in Florida. The alterna	te name must include "Limited
2. State Of New Jersey		3. 581-714-1	10/000	
(Jurisdiction under the law company is organized)	of which foreign limited lia	bility	(FEI number, if appli	cable)
4. June 25th, 2015	·			
,	(Date first transacte (See sections 605,090	ed business in Florida, if prio 14 & 605.0905, F.S. to deterr	or to registration.) nine penalty liability)	2015
5. 4515 Main Street, Uni	t 2073			
Jupiter, FL. 33458				1-2
		dress of Principal Office)		
6. 4515 Main Street, Unit	2073			The state of the s
Jupiter, FL. 33458				8: 26
	(I	Mailing Address)		Om 6
7. Name and street addres	ss of Florida registered ag	ent: (P.O. Box NOT acc	eptable)	
Name:	Michael Bolanos			
Office Address:	4515 Main Street, Unit	2073		
	Jupiter		, Florida <u>33458</u> (Zip cod	
Registered ag en t's accep		City)	(Zip cod	c)
Having been named as re designated in this applica	gistered agent and to acc tion, I hereby accept the c ons of all statutes relative	appointment as registered to the proper and compl	d agent and agree to act lete performance of my d	liability company at the place in this capacity. I further agree luties, and I am famillar with an
8. The name, title or capa			nority to manage is/are:	
Agnes Lopez, President, 4	515 Main Street, Unit 20	73, Jupiter, FL. 33458		
9. Attached is a certificate furisdiction under the law of the translator must be su	of which it is organized. (n 90 days old, duly auther If the certificate is in a for	nticated by the official have eign language, a translati	ving custody of records in the

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Agnes Lopez

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

OTH LOGISTICS LIMITED LIABILITY COMPANY

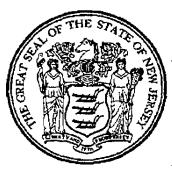
0400704209

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on November 21, 2014.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

J&M Trucking 2513 Brunswick Ave Linden, NJ 07036



Certification# 137359569

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 1st day of October, 2015

Set a Comany

Rohert A Romano Acting State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp