

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

6000003150436--2

-02/28/00--01160--001

****78.75 ****78.75

SUBJECT: CMI LOGISTICS INC

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

DIEGO N. ALVARADO

Name (printed or typed)

980 NW 135th STREET

Address

NORTH MIAMI - FL 33168

City, State & Zip

(305) 685-3623

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles

FILED
00 FEB 28 AM 8:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: CMI LOGISTICS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8575 NW 79th AVENUE
C
MIAMI, FLORIDA 33166

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares @ \$ 1.00 U.S DOLLAR VALUE

TOTAL VALUE \$ 100.00 U.S. DOLLAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

MR. CARLOS M. IGUINA, PRESIDENT
6831 SW 129th AVE # 5
Miami, Florida 33183

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Mr. Carlos M. Iguina, President 6831 SW 129th Avenue # 5
Miami, Florida 33183



Signature/Incorporator

02-23-00

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent



Signature/Registered Agent

2-23-00

Date

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TALLAHASSEE FLORIDA