Requester's Name Claudia Solano 2721 N. Pine Island Rd # 109 Sunrise, FL 33322 City/State/Zip Phone

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1		
(Corporation Name)	(Document #)	
2		
(Corporation Name)	(Document #)	1000046930615 -11/26/0101052001 *****70.00 ******70.08
(Corporation Name)	(Document #)	.
4		
(Corporation Name)	(Document #)	
☐ Walk in ☐ Pick up time		Certified Copy
☐ Mail out ☐ Will wait	Photocopy	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	
 □ Profit □ Not for Profit □ Limited Liability □ Domestication □ Other 	Amendment Resignation of R Change of Registe Dissolution/Witho	drawal ALLAH
OTHER FILINGS	REGISTRATION/Q	
Annual Report Fictitious Name	Foreign Limited Partnersh Reinstatement Trademark Other	ip of STATE

Examiner's Initials (1)

ARTICLES OF INCORPATION

OF

2001 NOV 26 AM 9: 51

SECRETARY OF STATE TALLAHASSEE FLORIDA

Pro Trucking, Inc.

The undersigned incorporator(s), for the purposes of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Pro Trucking, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 2721 N. Pine Island Road # 109
Sunrise. FL 33322

ARTICLE III CAPITAL STOCK

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

100

ARTICLE IV INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

Claudia Solano 2721 N. Pine Island Rd # 109 Sunrise, FL 33322

ARTICLE V - INCORPORATORS

The names and address of the person(s) signed these Articles of Incorporation are as follows:

Name: Claudia Solano

Address: 2721 N. Pine Island Rd. # 109 City: Sunrise, FL 33322

Name: Address: City:	State:	Zip:	
Name: Address: City:		State:	Zip:
IN WITNESS Articles of Inc	WHEREOF, the corporation this 1	e undersigned subscriber 15 day of November, 2001	(s) have executed these l
		<u> </u>	(Seal) (Seal) (Seal)

STATE OF FLORIDA) SS COUNTY OF BROWARD)

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

Claudia Solano

Known to me and known to the be person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before that she executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 15th day of Nov, 2001.

(Notary Public, State of Florida at large)

(Notary Seal)

MICHELLE ROSA-GONZALEZ

MY COMMISSION # CC 737366

EXPIRES: April 26, 2002

EXPIRES: April 26, 2002

1-800-3-NOTARY FIR Notary Service & Bonding Co.

My Commission expires: APRIL 26,2002

B. Officers:

President: Claudia Solano

Address: 2721 N. Pine Island Rd. #109

Sunrise, Fl 33322

Vice President:

Address:

Secretary: Claudia Solano

Address: 2721 N. Pine Island Rd. #109

Sunrise, Fl 33322

Treasurer: Address:

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

Name and Street address of Florida registered agent:

Name: Claudia Solano

Office Address: 2721 N. Pine Island Rd #109

City: Sunrise

State: Fl

Zip: 33322

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this application, I hereby accept the appointment as registered agent and 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.

Registered agent's signature:

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.

(Signature of Chairman, Vice Chairman, or any officer listed in application)

Claudia Solano, President

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICER

FILED
2001 NOV 26 AM 9: 51

Pursuant to the provisions of section 607.0501, Florida Statutes, the MELAHASSEE FLORIDA corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

The name and addr Claudia Solano	ess of the registered agent and office is:
(Name)	
2721 N. Pine Islan	d Rd # 109
(P.O. Box NOT Acc	
Sunrise, FL 33322	2
(City/State/Zip)	
	(g) .
	Signature:
	Title: President
	Date: November 15, 2001
Having been name	d as registered agent and to accept service of process for poration at the place designated in this certificate, I

Date: November 15, 2001

Signature:

agent.

REGISTERED AGENT FILING FEE: \$35.00

capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept the obligations of my position as registered