

P03000108944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

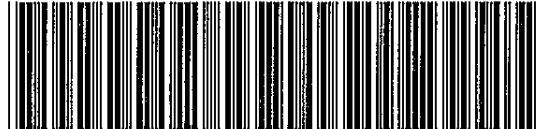
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/03/03--01022--024 **78.75

RECEIVED
03 OCT -3 AM 11:16
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
03 OCT -3 PM 12:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓

g/10/

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

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

1. LINDEN & HOEVEN DORF, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input checked="" type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF INCORPORATION

IN ACCORDANCE WITH chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

LINDEN & HOEVENDORF, INC

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS / MAILING ADDRESS IS:

9521 HOLIDAY RD.

MIAMI, FLORIDA 33157

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGNIZED IS:

**THIS CORPORATION MAY ENGAGE IN ANY AND LAWFUL
BUSINESS IN THE FREIGHT FORWARDING INDUSTRY
PERMITTED UNDER THE LAWS OF THE USA, THE STATE OF
FL. OR ANY OTHER STATE, COUNTRY, TERRITORY OR
NATION.**

ARTICLE IV SHARES

THE NUMBERS OF SHARES OF STOCKS IS:

100 – SHARES \$ 10.00 PAR VALUE

ARTICLE V INITIAL OFFICERS / DIRECTORS

THE NAME (S) AND ADDRESS (ES):

LAURA SANCHEZ (P.VP.T.S)

9521 HOLIDAY RD.

MIAMI, FL 33157

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ARTICLE VI REGISTERED AGENT

The name and Florida Street address of the registered agent is:

BOB. BENITEZ
3529 S.W. 112 PLACE
MIAMI.FLORIDA 33165


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TALLAHASSEE FLORIDA

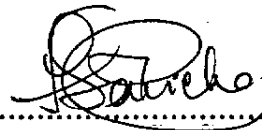
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LAURA SANCHEZ
9521 HOLIDAY RD.
MIAMI FLORIDA 33157

.....
Having been named as registered agent to accept services of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


.....
Signature/Registered Agent
10/1/03
.....
Date


.....
Signature/Incorporator
10/01/03
.....
Date