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(Requestor's Name)

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TRANSMITTAL LETTER

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

SUBJECT: 17R Transportation, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Jacqueline Lyons
Name (Printed or typed)

2815 NW 169 TERR
Address

Miami, FL 33056
City, State & Zip

(305) 528-4027
Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

JFR TRANSPORTATION, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2815 NW 169 TERRACE MIAMI, FL 33056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUS TRANSPORTATION

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

JACQUELINE LYONS ,2815 NW 169 TERR MIAMI, FL 33056, PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

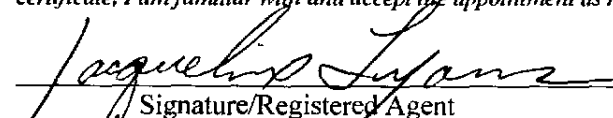
JACQUELINE LYONS 2815 NW 169 TERR MIAMI, FL 33056

ARTICLE VII INCORPORATOR

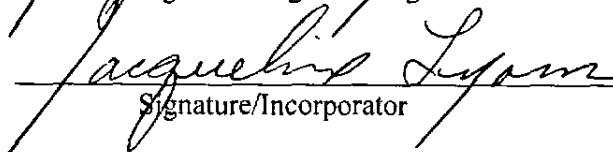
The name and address of the Incorporator is:

JACQUELINE LYONS 2815 NW 169 TER MIAMI, FL 33056

Having been named as registered agent to accept service 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



Signature/Incorporator

2-17-05

Date

2-17-05

Date