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CORPORATE FILING SERVICE Requester's Name 3320 S.W. 87TH AVENUE Address MIAMI, FL 33165 (305) 552-5973 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Walk in Rick up time Mail out Photocopy Will wait Certificate of Status **NEW FILINGS AMENDMENTS** _Profit ☐ Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger REGISTRATION/QUALIFICATION **OTHER FILINGS** Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other Examiner's Initials

LAZARUS

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 13, 2005

LAZARUS CORPORATE FILING SERVICE

SUBJECT: N.A.L. CORP. Ref. Number: W05000029063



We have received your document for N.A.L. CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is T99000001500 (NAL).

Please return the original and one copy of 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) 245-6855.

Tammy Hampton Document Specialist New Filings Section

Letter Number: 905A00040948

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION OF

NORTH AMERICA LOGISTICS CORP.

ARTICLE I

THE NAME OF THE CORPORATION IS:

NORTH AMERICA LOGISTICS CORP.

ARTICLE II

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE III

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THE CORPORATION IS AUTHORIZES TO ISSUES IS 600 SHARES AT \$1.00 PER VALUE.

ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH THE CORPORATION WILL BEGIN BUSINESS IS THE SUM OF \$600.00

ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMENCE UPON FILING.

ARTICLE VI

THE STREET ADDRESS IS THE PRINCIPAL OFFICE OF THE --CORPORATION IN THIS STATE SHALL BE:

10340 W. FLAGLER STREET MIAMI, FLORIDA 33174

ARTICLE VII

THE NAME(S) AND STREET ADDRESS(ES) OF THE PERSON SIGNING THESE ARTICLES ARE:

LIVERD ALVAREZ 2420 W. 54 FLACE HIALEAH, FL. 33016 IHOVANNA ALVAREZ 2420 W. 54 PLACE HIALEAH, FL. 33016 NORMA A. CELEDON 8842 S.W. 72 ST. #J160 MIAMI, FL 33173

ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN TWO OR MORE THAN SIX DIRECTORS. THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF THREE DIRECTORS WHOSE NAME AND ADDRESS ARE AS FOLLOWS:

LIVERD ALVAREZ 2420 W. 54 PLACE HIALEAH, FL. 33016 IHOVANNA ALVAREZ 2420 W. 54 PLACE HIALEAH, FL. 33016 NORMA A. CELEDON 8842 S.W. 72 STREET #J160 MIAMI, FL. 33173

ARTICLE IX

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE, AND THE NAME OF THE INITIAL REGISTERED AGENT AT THAT ADDRESS SHALL BE:

NORMA A. CELEDON 10340 W. FLAGLER STREET MIAMI, FL 33174

THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS SEVEN DAYS OF JUNE OF 2005.

NORMA A. CELEDON

SIGNATURE

LIVERD ALVAREZ

SIGNATURE

BIGNA TURE

IHDVANNA ALVAREZ

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned 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.

1.	The	name	of d	che	corpor	atio	n is:	NORTH	AMERIC	A LOG	7ISTICS	CORP.
2.	The	name	and	adc			_	istere LEDON	d agent	and	office	is
					10340		NAME LAGLE	R STRE	ET			<u></u>
					MIA	11, F	LORID	A 3317	4 .		خسنة حبيب ويبين والشار خسب وجيور وي	****
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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

DATE: JUNE 07, 2005