

P05000101093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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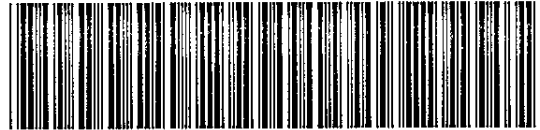
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/18/05--01065--002 **70.00

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05 JUL 18 PM 4:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C-8.7-

TRANSMITTAL LETTER

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

SUBJECT: AIR-OCEAN TRANSPORT, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: JOSE ASPILLAGA

Name (Printed or typed)

229 NW 85TH COURT

Address

MIAMI, FL 33126

City, State & Zip

305-266-1366

Daytime Telephone number

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

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:

AIR-OCEAN TRANSPORT INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

229 NW 85TH COURT
MIAMI, FL 33126

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRANSPORT FREIGHT

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOSE M. ASPILLAGA
229 NW 85TH CT
MIAMI, FL 33126

ARTICLE VI REGISTERED AGENT

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

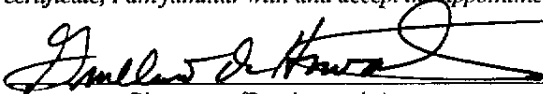
GUILLERMO DE HOWARTZ
1825 PONCE DE LEON BLVD. STE 380
CORAL GABLES, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GUILLERMO DE HOWARTZ
1825 PONCE DE LEON BLVD STE 380
CORAL GABLES, FL 33134

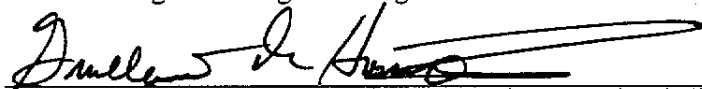
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

7/13/05

Date



Signature/Incorporator

7/13/05

Date

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05 JUL 18 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA