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SECRETARY OF STATE
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COVER LETTER

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

SUBJECT: MCT	Logistics, Inc.	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
EDOM: Ste	even Torregrosa			
PROW.	Name	e (Printed or typed)		
<u>;</u>	3290 E. Murray St.	Address		• • • • •
	Inverness, Fl. 34453	, State & Zip	7	
3	352-560-7313			· · · · · · · · · · · · · · · · · · ·
	Daytime	l'elephone 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:

MCT Logistics, Inc.

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PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

3290 E. Murray St. Inverness, Fl. 34453

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

one

INITIAL OFFICERS AND/OR DIRECTORS

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

None

ARTICLE VI REGISTERED AGENT

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

Steven Torregrosa 3290 E. Murray St. Inverness, Fl. 34453

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

Steven Torregrosa 3290 E. Murray St. Inverness, Fl. 34453

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

Feb. 17, 2006

Date

Feb. 17, 2006

Date

Signature/Incorporat

