Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 205-0381.

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

FLORIDA PROFIT/NON PROFIT CORPORATION

AXIS GLOBAL LOGISTICS USA, INC.

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SEURCIARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I

The initial name and address of this corporation shall be:

AXIS GLOBAL LOGISTICS USA, INC.

365 W LAUREL DRIVE SUITE 8 MARGATE, FL 33063

ARTICLE II

This corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE III

The capital stock authorized, the par value thereof, and the characteristics of such stock shall be as follows:

Number of Shares	Par Value	Class of
Authorized	Per Share	Stock
500	\$1.00	Common

ARTICLE IV

The name and address of the initial registered agent is:

ALBERTO F. CARRANZA

365 W LAUREL DRIVE SUITE 8 MARGATE, FL 33063

ARTICLE V

The name and street address of the incorporators to this Articles of Incorporation are:

ALBERTO F CARRANZA - Director

365 W LAUREL DRIVE, SUITE 8 MARGATE, FL 33063

LUIS PAUL MARCHAND - Director

365 W LAUREL DRIVE, SUITE 8

MARGATE, FL 33063

The undersigned incorporators have executed these Articles of Incorporation

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

DEURETARY OF STATE TALLAHASSEE, FLÒRIDA

Pursuant to the provisions of Section 607.325, 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 the corporation:

AXIS GLOBAL LOGISTICS USA, INC.

The name and address of the registered agent and office is:

ALBERTO F. CARRANZA

365 W LAUREL DRIVE SUITE 8 MARGATE, FL 33063

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA

STATUTES.

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