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CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if kn	own):
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NEW FILINGS	<u>AMENDMENTS</u>	
Profit Not for Profit	Amendment Resignation of P.A.	Officer/Director
Limited Liability	Resignation of R.A., Change of Registere	
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OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report	- Foreign	
☐ Fictitious Name	Limited Partnership Reinstatement	
	Trademark Other	• .
		Francisco Valdicle
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CR2E031(7/97)

SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

08 AUG -8 AM 9: 41

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I - NAME

THE NAME OF THE CORPORATION SHALL BE:

JR TRANSPORT LOGISTICS,

ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

10773 NW. 58st., Suite 386 DORAL, FLORIDA 33178

ARTICLE III - SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

1,000

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

FRANK DEL CRISTO TR.
10773 NW 58 St., SuitE 386
DORAL, FLORIDA 33178

ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

TRANK DEL CRISTO TR.

10773 NW. 58 St. S4176 386

DORAL, FLORIDA 33178

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES

OF INCORPORATION THIS,
DAY OF August 2008

SIGNATURE

ARTICLE VI - DIRECTOR(S)

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

FRANK DEL CRISTO JR. (PRESIDENT) 10773 NW. 58 St Suite 386 DORAL, FLORIDA 33178

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED

<u>OFFICE</u>

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT 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 RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE