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TRANSMITTAL LETTER

	ent of State					
	of Corporations					
P.O. Bo						
Tallaha	see, FL 32314					
SUBJF	TI: DOMESTICATION OF VISAS, INC.					
SUBSE	TO DOMESTICATION OF VISAS, INC.					
•	i					
Enclose	u is an original and one (1) copy of the Certificate of Domestication and a check for:					
	•					
FEES:						
	ertificate of Domestication \$50.00					
	cticles of Incorporation and Certified Copy \$78.75					
	otal to domesticate and file \$128.75					
OPTIC	VAY					
<u>OPTIC</u>	NAL:					
	Certificate of Status \$ 8.75					
	refinicate of Status 5 0.75					
4						
	ROM: VADIM SHAPOSH Name (printed or typed)					
	Name (printed or typed)					
	3201 WISTERIA PL Address					
	Address					
	D. W.TA GOODA EL 33950					
	PUNTA GORDA, FL 33950 City, State & Zip					
1	City, State & Zip					
	(240)-381-4212					
	(248) - 381 - 42/3 Daytime Telephone Number					
	baytime relephone ramber					

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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 19, 2008

VADIM SHAPOSH 3201 WISTERIA PL PUNTA GORDA, FL 33950

SUBJECT: VISAS, INC.

Ref. Number: W08000043696

We have received your document for VISAS, INC. and your check(s) totaling \$137.50. 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.

Please complete Article(s) I - VII.

Please return the corrected 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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 308A00050898

CERTIFICATE OF DOMESTICATION

The undersigned, _	VADIM SHAPOSH , PR	ESIDENT		_,
of VI	(Name) SAS, /VC. (Corporation Name) s 607 1801 Florida Statutes, does hereby certify:	(Title) a foreign corp	oration	ı ,
in accordance with	(Corporation Name) s. 607.1801, Florida Statutes, does hereby certify:			
1. The date on wh	ich corporation was first formed was	ARY 30 . 2	003	
	where the above named corporation was first form	-		
3. The name of the	g was MICHIGAN DEPARTMENT OF CONSULE corporation immediately prior to the filing of this SAS, INC.	Certificate of Domest	ication	_ ·
	e corporation, as set forth in its articles of incorpora		ant to	
s. 6°7.0202 and	607.0401 with this certificate is	WE-		
 The urisdiction administration of immediately be 	that constituted the seat, siege social, or principal of the corporation, or any other equivalent jurisdiction the filing of the Certificate of Domestication was DEPARTMENT OF CONSUMER AND	place of business or co on under applicable la vas	entral w,	
6. Attrahed are Fl to \$ ' 97.1801.	orida articles of incorporation to complete the dome	estication requirement	s pursu	ant
I am _PRESIDI	ENT, of VISAS, INC.	· ***		_
and am authorized	o sign this Certificate of Domestication on behalf of	of the corporation and		one
•	Vastur flessof - (Authorized Signature)			
	Filing Fee:		08 SEP 30	SECRE
	Certificate of Domestication Articles of Incorporation and Certified Copy Total to domesticate and file	\$50.00 <u>\$78.75</u> \$128.75		FILED TARY OF STATE OF CORPORAL
INHS53 (04)			AM 9: 23	TATE RATIONS

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

SECRETARY OF STATE DIVISION OF CORPORATIONS

08 SEP 30 AM 9: 23

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE: VISAS TRANSPORT, INC.

ARTICL: II PRINCIPAL OFFICE

THE PRINC. AL PLACE OF BUSINESS/MAILING ADDRESS IS: 3201 WISTERIA PLACE PUNTA GORDA, FL 33950

ARTICLE III PURPOSE

THE PURP FOR WHICH THE CORPORATION IS ORGANIZED:

TRUCKING; FREIGHT, TRANSPORTATION

ARTICLL IV SHARES

THE NUMB: R OF SHARES OF STOCK IS:

10000

ARTICL) V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME :) AND ADDRESS(ES) AND SPECIFIC TITLES:

PRESIDENT VADIM SHAPOSH

TREASURER VADIM SHAPOSH

SECRETARY VADIN SHAPOSH

ARTICL VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME: VD FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS: VA'UM SHAPOSH

3201 WISTERIA PL

PUNTA GORDA, FL 33950

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

VADIM SHAPOSH

3201 WISTERIA PL

PUNTA GORDA, FL 33950

HAVING B' EN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED C 'RPORATION 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.

9-16-2008 Date

Signature Incorporato