

PO 90000289BB

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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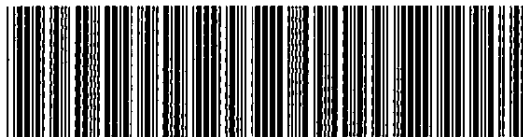
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA

## COVER LETTER

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

SUBJECT: L & Luis 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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

FROM: Luis E. Luis  
Name (Printed or typed)

16200 S.W. 199 AVE.  
Address

Miami, FL 33187  
City, State & Zip

786-367-0221  
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:

L & Luis Transport INC.

## ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

16200 S.W. 199 AVE.  
Miami, FL. 33187

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Transport

## ARTICLE IV SHARES

The number of shares of stock is:

10

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Luis E. Luis  
16200 S.W. 199 AVE.  
Miami, FL. 33187

## ARTICLE VI REGISTERED AGENT

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

Luis E. Luis  
16200 S.W. 199 AVE.  
Miami, FL. 33187

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

L. E. Luis  
16200 S.W. 199 AVE.  
Miami, FL. 33187

\*\*\*\*\*  
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

                      
L R

Signature/Registered Agent

                      
L R

Signature/Incorporator

                      
3/26/09

Date

                      
3/26/09

Date

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09 MAR 30 PM 12:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA