# P10000043392

· (Re	questor's Name)			
(Ad	dress)	<u>, , , , , , , , , , , , , , , , , , , </u>		
(Add	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Bus	siness Entity Nar	ne)		
(Document Number)				
Certified Copies				
Special Instructions to Filing Officer:				
		· •		

Office Use Only



400181028854

05/19/10--01016--009 \*\*78.75

TO MAY 19 AM 9 52
SECRETARY OF STATE
SECRETARY OF S

(-21)-10 Ch

# **COVER LETTER**

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

SUBJECT:	U.S. Logistix, Inc		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are an ori	iginal and one (1) copy of the artic	cles of incorporation and	a check for:
■ \$70.00 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
		ADDITIONAL CO	PYREQUIRED
FROM:	VIACHESLAV KULBAKA	(Printed or typed)	
	Name	(Finited of typed)	
	9475 TOUCHTON RD., UNIT #		
	A	Address	
_	JACKSONVILLE, FL 32246	Charles (), 72 in	
	City,	State & Zip	
	904.866.2944		
_	Daytime To	elephone number	
	KVEACHESLAV@MAIL.RU		
<del></del>	E-mail address: (to be used	I for future annual report r	iotification)

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:

U.S. Logistix, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 9745 TOUCHTON RD., UNIT # 2501

JACKSONVILLE, FL 32246

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Engage in Logistical services and in any legal business relating tem

### ARTICLE IV SHARES

The number of shares of stock is: Maximum 1000 shares at no par value

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

ngorporator

List name(s), address(es) and specific title(s): VIACHESLAV KULBAKA, P 9745 TOUCHTON RD., UNIT # 2501
JACKSONVILLE, FL 32246

### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: VIACHESLAV KULBAKA 9745 TOUCHTON RD., UNIT # 2501 JACKSNVILLE, FL 32246

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: VIACHESLAV KULBAKA 9745 TOUCHTON RD., UNIT # 2501 JACKSNVILLE, FL 32246

***************	***********
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	l accept the appointment as registered agent and
agree to act in this capacity	
Wat I	
( KYS LP 1	5/17/10
Signature/Logistered/Agent	Date
CHOL NV	5/17/10

10 NAY 19 AN 9:53 SECRETARY OF STATE TALLAHASSEE, FLORE

Date

+