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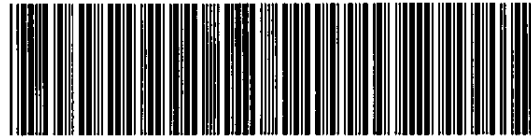
Erin Cohen GAVE

AUTHORIZATION BY PHONE TO
CORRECT Art II + VII

DATE PS 7/26/10

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: NEHOC LOGISTICS, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: NEHOC LOGISTICS, INC.

Name (Printed or typed)

P.O. BOX 22

Address

LACROSSE, FL 32658

City, State & Zip

(407) 967-5883

Daytime Telephone number

nehoclogistics@yahoo.com

E-mail address: (to be used for future annual report notification)

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:

NEHOC LOGISTICS, INC.

ARTICLE II PRINCIPAL OFFICE

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

19610 N.W. 75TH STREET, ALACHUA, FL 32615-4602

mailing address, P.O. BOX 22, LACROSSE, FL 32658

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO START LONG-DISTANCE TRUCKING BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES @ \$1.00/SHARE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

EUNICE S.

COHEN,

PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: EUNICE S. COHEN
19610 N.W. 75TH STREET, ALACHUA, FL 32615-4602

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EUNICE S. COHEN, P.O. BOX 22, LACROSSE, FL 32658

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

Eunice S. Cohen
Signature/Registered Agent

Eunice S. Cohen
Signature/Incorporator

July 19, 2000
Date
July 19, 2000
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUL 22 PM 2:48

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AND
FILED