P1000009a1a1

	•			
(1	Requestor's Name)			
(Address)			
`	•			
(Address)				
(Addless)				
	Diturbata Dia (Dia ana 40			
(·	City/State/Zip/Phone #)			
☐ PICK-UP	WAIT MAIL			
•				
(1	Business Entity Name)			
	·			
	Document Number)			
`	•			
Certified Conies	Certificates of Status			
Certified Copies	Certificates of Status			
Special Instructions	to Filing Officer:			
The state of the s				
Ì				
	•			
	,			
	·			

Office Use Only



300187480763

11/09/10--01011--009 **78.75

10 NOV -9 AM II: 39

B McKnight NOV 12 2010

COVER LETTER

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

SUBJECT: Independent Cargo Services, Inc.				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:			
(-) [,				
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of			
	Status ADDITIONAL COPY REQUIRED			
	ADDITIONAL COLL REQUIRES			
	e (Printed or typed)			
1665 NW 102nd Avenue, Suite 107 Address				
Doral, FL 33172				
City,	State & Zip			
(786) 621-5385 Daytime T	elephone number			
jbonacci@worldwisecon: E-mail address: (to be use	sulting.net d 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)

٦

ARTICLE I The name of the co	NAME Independent Cargo Seproration shall be:	ervices, Inc.	
	PRINCIPAL OFFICE Principal street address 1665 NW 102nd Avenue, Suite 107 Doral, FL 33172		Mailing address, if different is:
	PURPOSE which the corporation is organized is: any and all lawful business.		%। VIS 10
ARTICLE V	SHARES Tres of stock is:100 Shares INITIAL OFFICERS AND/OR DIRECTO Title: Karma E. Ruiz, Director 1665 NW 102nd Avenue, Suite 10 Doral, FL 33172	Name and Title: Address:	3 A
Name and T Address:	itle:Ernest S. Varela, Director 1665 NW 102nd Avenue, Suite 10 Doral, FL 33172	Name and Title Address:	·
Name and T Address:	Title:	Name and Title Address:	
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) Janet S. Bonacci 1665 NW-102nd Avenue, Suite Doral, FL 33172	_	nt is:
ARTICLE VII The name and add Name: Address:	INCORPORATOR dress of the Incorporator is: Karma E. Ruiz 1665 NW 102nd Avenue, Suite 1 Doral, FL 33172	107	
	ned as registered agent to accept service of proc m familiar with and accept the appointment as r		
_Gan	Required Signature/Registered Agent		November 5, 2010 Date
	ument and affirm that the facts stated herein o Department of State constitutes a third degree fel		
	Required Signature/Incorporator		November 5, 2010