

P120000095713

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000272608 3)))



H120002726083ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

RECEIVED
12 NOV 16 AM 11:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
ULTIMATE TRANSPORT INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

FILED
12 NOV 16 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS 11/19/12

Electronic Filing Menu

Corporate Filing Menu

Help



November 16, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE CORPORATE KIT COMPANY

SUBJECT: ULTIMATE TRANSPORT INC.
REF: W12000057924

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Maryanne Dickey FAX Aud. #: H12000272608
Regulatory Specialist II Supervisor Letter Number: 312A00027674
New Filing Section

P.O BOX 6327 - Tallahassee, Florida 32314

H12000272608

COVER LETTER

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

SUBJECT: Ultimate 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: _____

Name (Printed or typed)

Ultimate Transport Inc

Address

19925 NE 14 CT

City, State & Zip

MIAMI, FL 33179

Daytime Telephone number

786-709-7747

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

NOTE: Please provide the original and one copy of the articles.

H12000272608

112000272608

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME ULTIMATE TRANSPORT INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
19925 NE 14 CT
MIAMI, FL 33179

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
TO TRANSPORT GOOD FROM STATE TO STATE.

FILED
12 NOV 16 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES
The number of shares of stock is: 1000 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JUDE DECIUS - PRESIDENT	Name and Title: _____
Address: 19925 NE 14 CT	Address: _____
MIAMI, FL 33179	_____
_____	_____

Name and Title: MADELL RAPHAEL - VP	Name and Title: _____
Address: 116 NW 9 TERRACE	Address: _____
HALLANDALE BEACH, FL 33009	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: JUDE DECIUS
Address: 19925 NE 14 CT
MIAMI, FL 33179

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: NAU VERDIEU
Address: 19925 NE 14 CT
MIAMI, FL 33179

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

Jude Decius
Required Signature/Registered Agent

11/15/12
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

NAU VERDIEU
Required Signature/Incorporator

11/15/12
Date