

From:

Division of Corporations

07/15/2013 13:07

44 001/003

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800) 221-2972
Fax Number : (888) 692-9256

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**
Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
LTL Express Lines, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

FILED
13 JUL 15 PM 1:09
SECRETARY OF STATE
TALLAHASSEE FLORIDA
RECEIVED
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

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From:

07/15/2013 15:07

FILED #944 P.002/003

13 JUL 15 PM 1:09

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: LTL Express Lines, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2400 ROBERTS RANCH ROAD

PLANT CITY, FL 33566

Mailing address, if different is:

P.O. BOX 820498

PEMBROKE PINES, FL 33082

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For any and all purposes for which a corporation may be formed.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ALEXANDER VALENTE

Address: 2400 ROBERTS RANCH ROAD

PLANT CITY, FL 33566

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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07/15/2013 15:08

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(cont.)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: ALEXANDER VALENTE
Address: 2400 ROBERTS RANCH ROAD
PLANT CITY, FL 33566

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ALEXANDER VALENTE
Address: 2400 ROBERTS RANCH ROAD
PLANT CITY, FL 33566

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

Required Signature/Registered Agent

7/15/13
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.

Required Signature/Incorporator

7/15/13
Date