

P/3000072340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

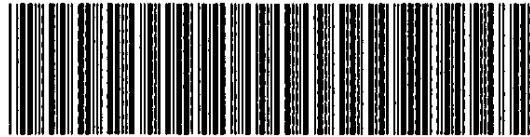
(Document Number)

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~~W/3 35235~~

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
2013 AUG 27 PM 4:00

1/4

## COVER LETTER

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

SUBJECT: K. E. M. 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:

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing-Fee —	-Filing-Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input checked="" type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Kelly G. Mota-Cruz  
Name (Printed or typed)

2308 Davis Blvd.  
Address

fort Myers, FL. 33905  
City, State & Zip

239 938-6334  
Daytime Telephone number

jeroniLive@icloud.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 28, 2013

KELLYN G. MOTO-CRUZ  
2308 DAVIS BLVD.  
FORT MYERS, FL 33905

SUBJECT: KELMAR TRANSPORT, INC.  
Ref. Number: W13000035235

We have received your document for KELMAR TRANSPORT, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 913A00015293

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**The name of the corporation shall be: KELMAR TRANSPORT, INC.

2013 AUG 27 PM 4:00

**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

2308 Davis Blvd.Fort Myers, Fl. 33905**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: To transport merchandise throughout the East Coast of the United States**ARTICLE IV SHARES** 100

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Kellyn G. Mota-CruzName and Title: PresidentAddress: 2308 Davis Blvd.  
Fort Myers, Fl. 33905

Address: \_\_\_\_\_

Name and Title: Enriquetta MotaName and Title: Vice PresidentAddress: 2308 Davis Blvd.  
Fort Myers, Fl. 33905

Address: \_\_\_\_\_

Name and Title: Mariano CruzName and Title: TrusteeAddress: 82 Waimwright Street  
Providence, Rhode Island 02908

Address: \_\_\_\_\_

(conti.)

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

2013 AUG 27 PM 4:00

**ARTICLE VI REGISTERED AGENT**

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

Name:

Kellyn G. Mota-Cruz

Address:

2308 DAVIS BLVD.  
FORT MYERS, FL 33905

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name:

Kellyn G Mota-Cruz

Address:

2308 Davis Blvd  
FORT MYERS, FL 33905

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

Kellyn G. Mota-Cruz

Required Signature/Registered Agent

8-14-13

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.

Kellyn G. Mota-Cruz

Required Signature/Incorporator

Date