

P13000075853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

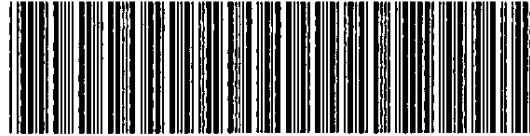
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/11/13--01030--002 **87.50

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13 SEP 11 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ps 9/16/13

COVER LETTER

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

SUBJECT: Transport Group International, 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
ADDITIONAL COPY REQUIRED	

FROM: **Anthony B. Cunningham**
Name (Printed or typed)

3333 NW 34 Street
Address

Lauderdale Lakes, Florida 33309
City, State & Zip

954-865-1858
Daytime Telephone number

transportgrpint@aol.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: Transport Group International, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

3333 NW 34 Street
Lauderdale Lakes, FL 33309

13 SEP 11 AM 10:47
Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Trucking company delivering
dry and refrigerated cargo.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anthony B. Cunningham

Name and Title: President

Address 3333 NW 34 Street
Lauderdale Lakes, FL 33309

Address: 3333 NW 34 Street
Lauderdale Lakes, FL 33309

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(conti.)

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Name and Title: _____ Name and Title: 13 SEP 11 AM 10:47
Address: _____ Address: SECRETARY OF STATE

TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Edward Greenfield
Address: 5261 NE 10 Ave.
Pompano Beach, FL 33064

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

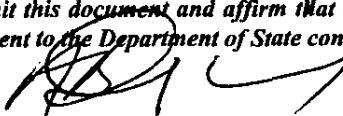
Name: Anthony B. Cunningham
Address: 3333 NW 34 Street
Lauderdale Lakes, FL 33309

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

9/9/13
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

9/9/13
Date