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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I20000000019

: (305)552-5973

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FLORIDA PROFIT/NON PROFIT CORPORATION ORVE TRANSPORT SERVICE CORP

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

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H 1 4 0 0 0 2 0 4 0 1 3 ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE 1 NAME: The name of the corporation is:	
ORVE Transport Service Co	ort
ARTICLE II PRINCIPAL OFFICE;	
The principal street address and mailing address is: 8544 NW 64 St MIAMI FL 33166	14 AUG 29
ARTICLE III SHARES: The number of shares of stock is:	1 44 9:52
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: JOSE ROCKIQUEZ (P) VICTOR BUYONES (VP)	2
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: 5050 ROCK ST	
Miami FL 33166	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
8544 NW 64 ST	
MIAMI FL 331106	

H14000204013

Required Signatures:

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

Registered Agent

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.

Date

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