

11/11 Nov. 13. 2014 5:12 PM

Connelly Wasstrom Castillo, P.A.

Nov 30 2014 P. 4:35

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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 : JORGE M CASTILLO CPA
Account Number : I20140000067
Phone : (305)275-0208
Fax Number : (305)275-0210

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

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RECEIVED

14 NOV 14 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
Streamline Cargo Inc

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 NOV 14 PM 12:04

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Nov. 13. 2014 5:17PM

Connolly Wasserstrom Castillo PA

114000

No. 3024

APPROVED
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10-3

ARTICLES OF INCORPORATION

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

14 NOV 14 PM 12:04

ARTICLE I NAME

The name of the corporation shall be: Streamline Cargo Inc

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

13710 SW 8 St

Miami, FL 33184

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alexeis Palma, Pres

Name and Title: _____

Address: 13710 SW 8 St

Address: _____

Miami, FL 33184

Name and Title: Thayluma Palma, VP

Name and Title: _____

Address: 13710 SW 8 St

Address: _____

Miami, FL 33184

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____



14-Nov. 13. 2014 5:17PM

Connolly Wasserstrom Castillo PA

APPROVED
No. 3023 P. 3/3 1/1

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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: Alexels Palma
Address: 13710 SW 8 St
Miami, FL 33184

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jorge M Castillo CPA
Address: 8190 Sunset Dr
Miami, FL 33173

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.

[Signature]
Required Signature/Registered Agent

11/13/14
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.

[Signature]
Required Signature/Incorporator

11/13/14
Date