P/5000035363

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PICK-UP WAIT MAIL					
(Business Entity Name)					
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MAR 1 7 2015 S. GILBERT

COVER LETTER

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

SUBJECT: Castillo Transperson	ortation Se TENAME-MUSTINCLI	AVICE IN
Enclosed are an original and one (1) copy of the artic		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: <u>Laphae</u> Ca		
5701 SW	- 1	
Mi Ami, F	1. 3317. State & Zip	3
205-W7 Daytime Te	elephone number	
E-mail address: (to be used	3wgwai	notification)

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



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FLORIDA DEPARTMENT OF STATE TO A SECTION OF STATE OF STAT

October 20, 2014

RAPHAEL CASTILLO 5701 SW 95 CT MIAMI, FL 33173

SUBJECT: CASTILLO TRANSPORTATION SERVICE, INC

Ref. Number: W14000044892

We have received your document for CASTILLO TRANSPORTATION SERVICE, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 214A00015702

ANTICLES OF LITCORFORATION

	In compliance wi	ith Chapter 607 an	d/or Chapter 621,	F.S. (Profit)	. 1		
ARTICLE I NAME The name of the corporation	n shall be:	HIRL C	ASTILLO	Thans	port.	SE	rvie
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