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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone : (305)552-5973

Fax Number : (305)675-5944

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

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION INTERSTATE WIDE TRANSPORTATION, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
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SEP 2 2 2015

S. GILBERT

Corporate Filing Menu

Help

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

	Ç.
	ARTICLE I NAME: The name of the corporation is:
	Interstate Wide Transportation, Inc
	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
	300 NW 129 Avenue
}	Miami, F1 33182
	2
AR	TICLE III SHARES: The number of shares of stock is: 100 [0]
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
-	YOLITZA TERRELONGE (P)
	Yunilde Del Carmen Perez Cur
-	
J-	RTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: e name and Florida street address (PO Box not acceptable) of the registered agent is:
	
	e name and Florida street address (PO Box not acceptable) of the registered agent is:
J-	e name and Florida street address (PO Box not acceptable) of the registered agent is: VOITEQ TEXTELONGE 300 NW 129 AVENUE
J-	e name and Florida street address (PO Box not acceptable) of the registered agent is:
Th	e name and Florida street address (PO Box not acceptable) of the registered agent is: VOITEQ TEXTELONGE 300 NW 129 AVENUE
Th	e name and Florida street address (PO Box not acceptable) of the registered agent is: YOLITZA TEXTELONGE 300 NW 129 AVENUE Miami FL 33182
Th	e name and Florida street address (PO Box not acceptable) of the registered agent is: YOLITZA TEXTELONGE 300 NW 129 AVENUE Miami FL 38182 RTICLE VI INCORPORATOR: The name and address of the Incorporator is:

H15000226972

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

Renistered Agent

9/21/15

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.

Mello y

9-21-2015 Date