

P16000026299

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000073717 3)))



H160000737173ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : SUPERBIZ.COM, INC.
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (305) 675-2811

16 MAR 23 PM 11:11
RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

****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
JEA TRANSPORT CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

RECEIVED

16 MAR 23 PM 4:52

RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

H16000073717 3

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 :
JEA TRANSPORT CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is :

**11601 N. MAGNOLIA AVE
OCALA, FLORIDA 34475**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:
1500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

**PRESIDENT:
JUAN ESPINO ALICEA
11601 N. MAGNOLIA AVE
OCALA, FLORIDA 34475**

16 MAR 23 PM 11:11
STATE OF FLORIDA
TALLAHASSEE

H16000073717 3

H16000073717 3

PAGE 2 JEA TRANSPORT CORP.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

**JUAN ESPINO ALICEA
11601 N. MAGNOLIA AVE
OCALA, FLORIDA 34475**

16 MAR 23 PM 11:11
DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

**JUAN ESPINO ALICEA
11601 N. MAGNOLIA AVE
OCALA, FLORIDA 34475**

Having been named as registered agent to accept service of process for the above 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.



JUAN ESPINO ALICEA / Registered Agent

3/22/16

Date

I submit this document and affirm that facts stated herein are true. I am aware that any 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.

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I acknowledge that I have read the above "Notice of Annual Report" statement and understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.



JUAN ESPINO ALICEA / Incorporator

3/22/16

Date

H16000073717 3