

05/03/2016 11:2

552 0140

LAZARUS

PAGE 02/04

P16000038580

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.

((H16000108581 3)))



H160001085813ABC/

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
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
DELFINES TRANSPORTATION CORP.**

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

RECEIVED

16 MAY -3 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 MAY -3 PM 1:29

611 610

764
5416

Electronic Filing Menu

Corporate Filing Menu

Help

05/03/2016 11:27
850-817-8381

3852201440

LAZARUS

PAGE 01/04

5/3/2016 11:33:35 AM PAGE 1/001 Fax Server



May 3, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: DELFINES TRANSPORTATION CORP.
REF: W16000032524

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The designation of the registered agent must be at a Florida street address.

You must list at least one incorporator with a complete business street address.

Please return 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.

Teresa Brown
Regulatory Specialist II

FAX And #: H16000108581
Letter Number: 316A00009136

ARTICLES OF INCORPORATION H16000108581
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME: The name of the corporation is:

Delfines Transportation Corp.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

253 SE 32 av Homestead FL 33033.

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Odalys Fernandez (P)

Yoaly M. Fernandez (S)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

ODALYS FERNANDEZ

253 SE 32 AV

Homestead FL 33033

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Odalys Fernandez

253 SE 32 AV

Homestead FL 33033

H16000108581

H16000108581

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.

Incorporator

Date

16 MAY -3 AM 11:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H16000108581