## P16000043512

(Re	equestor's Name)	)		
~ (Ad	ldress)	<u> </u>		
(Ad	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Na	me)		
(Document Number)				
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## **COVER LETTER**

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

NAPLES WORLDWIDE LOGISTICS INC.

\$70.00 Filing Fee	□ \$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:	UL A. ROBINSON				
. KO	Name	(Printed or typed)	<del>,</del>		
227	2272 AIRPORT-PULLING RD. SOUTH				
<del></del> _	Address				
NA	PLES. FL 34112				
<del></del>	City, State & Zip				
(239	9)784-3879				
	Daytime Telephone number				
parc	bins $\widehat{g}$ eagle.fgcu.edu				
	E-mail address: (to be used	d for future annual report	notification)		

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

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

	NAPLES WORLDWIDE LOG	<del></del>	40	15.
CLE II PRINC	CIPAL OFFICE Principal street address		Mailing address, if different is	. F.
<del></del>	Time par server		ivialing address, it differ the	20
AIRPORT-PULI	LING RD., SOUTH	P.O. BO	X 2496	
LES. FL 34112		NAPLES	Mailing address, if different is X 2496 S, FL 34106	100 C
CLE III PURP	OSE			765
urpose for which	OSE the corporation is organized is:	ALL LAWFULL	BUSINESS	34:
		<del></del>	<del></del>	
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		<del></del>	<del></del>	
CIFIV SHAR	PFS			
CLE IV SHAR	ES 100			
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Umber of shares of CLE V INITL  Name and Titl  Address  Name and Title  Address	AL OFFICERS AND/OR DIRECTORS  e: PAUL A. ROBINSON, PRESIDENT  2272 AIRPORT-PULLING RD, SOUTH  NAPLES, FLORIDA 34112	_ Address: _ Name and Title _ Address:	2272 AIRPORT-PULLING NAPLES, FL 34112	RD. SOUT
Umber of shares of CLE V INITL  Name and Titl  Address  Name and Title  Address	AL OFFICERS AND/OR DIRECTORS  e: PAUL A. ROBINSON, PRESIDENT  2272 AIRPORT-PULLING RD, SOUTH  NAPLES, FLORIDA 34112	_ Address: _ Name and Title _ Address:	2272 AIRPORT-PULLING NAPLES, FL 34112	RD. SOUT
Umber of shares of CLE V INITL  Name and Titl  Address  Name and Title  Address	AL OFFICERS AND/OR DIRECTORS  e: PAUL A. ROBINSON, PRESIDENT  2272 AIRPORT-PULLING RD, SOUTH  NAPLES, FLORIDA 34112	Address:  Name and Title Address:  Name and Title	2272 AIRPORT-PULLING NAPLES, FL 34112	RD. SOUT
Name and Title Address  Name and Title	AL OFFICERS AND/OR DIRECTORS  e: PAUL A. ROBINSON, PRESIDENT  2272 AIRPORT-PULLING RD, SOUTH  NAPLES, FLORIDA 34112	Address:  Name and Title Address:  Name and Title	2272 AIRPORT-PULLING NAPLES, FL 34112	RD. SOUT
Name and Title Address  Name and Title	AL OFFICERS AND/OR DIRECTORS  e: PAUL A. ROBINSON, PRESIDENT  2272 AIRPORT-PULLING RD, SOUTH  NAPLES, FLORIDA 34112	Address:  Name and Title Address:  Name and Title	2272 AIRPORT-PULLING NAPLES, FL 34112	RD. SOU

Name a	nd litte:	Name and Title:	-
Addres	s	Address:	-
			-
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·			
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	of the registered agent is:	
Name:	PAUL A. ROBINSON	S. A.O. TOBISTON DE AUGUSTICATION	
Address:	2272 AIRPORT-PULLING RD, SOUTH	- Po M.	
	NAPLES. FL 34112		eru.
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		nen e
The name and a	address of the Incorporator is:	~ ; . ∑ <b>™. *</b>	in i
Name:	PAUL A. ROBINSON		14Nd.n
Address:	2272 AIRPORT-PULLING RD. SOUTH	- 1	
	NAPLES, FL 34112	<del></del>	
Effective date, i		. (OPTIONAL) not be more than five business days prior or 90 business	i
Note: If the dat	e inserted in this block does not meet the applicable effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed a .	:S
Having been na this certificate, I	med as registered agent to accept service of proces am familiar with and accept the appointment as re	ss for the above stated corporation at the place designated egistered agent and agree to act in this capacity	'in
		5/19/16	
<del></del>	Required Signature/Registered Agent	Date	
I submit this do document to the	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felo	e true. I am aware that the false information submitted in ony as provided for in s.817.155, F.S.	<b>3</b> (1
	The state of the s	= 1,0/1	
Requ	uired Signature/incorporator	D// Date	-