

MAY/26/2016 5/28/2016

P16000047012

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.

((H16000130423 3))



H160001304233ABCU

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 : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)444-4977

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

Email Address:

RECEIVED

16 MAY 26 PM 1:57

TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
JCI TRANSPORT CORP

Table with 2 columns: Item and Value. Rows include Certificate of Status (0), Certified Copy (1), Page Count (03), and Estimated Charge (\$78.75).

16 MAY 26 PM 3:15

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

ARTICLE I NAME JCI TRANSPORT CORP  
The name of the corporation shall be: \_\_\_\_\_

ARTICLE II PRINCIPAL OFFICE  
Principal street address \_\_\_\_\_ Mailing address, if different is: \_\_\_\_\_  
7970 HAWTHORNE AVE \_\_\_\_\_ SAME AS PRINCIPLE \_\_\_\_\_  
MIAMI BEACH FL 33141 \_\_\_\_\_

ARTICLE III PURPOSE ANY AND ALL LAWFUL BUSINESS  
The purpose for which the corporation is organized is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARTICLE IV SHARES 500  
The number of shares of stock is: \_\_\_\_\_

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JUAN CARLOS ROMEO CABRERA (P) Name and Title: \_\_\_\_\_  
Address 7970 HAWTHORNE AVE Address: \_\_\_\_\_  
MIAMI BEACH FL 33141 \_\_\_\_\_  
\_\_\_\_\_  
Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
16 MAY 26 PM 3:15

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: JUAN CARLOS ROMEO CABRERA  
Address: 7970 HAWTHORNE AVE  
MIAMI BEACH FL 33141

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JUAN CARLOS ROMEO CABRERA  
Address: 7970 HAWTHORNE AVE  
MIAMI BEACH FL 33141

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
16 MAY 26 PM 3:15

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

Juan Carlos G  
Required Signature/Registered Agent

5/24/16  
Date

*I submit this documents 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.*

Juan Carlos G  
Required Signature/Incorporator

5/24/16  
Date