

Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
FLORIDA LOGISTICTRANS INC.**

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

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November 4, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

SUBJECT: FLORIDA LOGISTICTRANS INC.
REF: W16000074774

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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The shares of stock must be a whole number.

If you have any further questions concerning your document, please call (850) 245-6052.

Matthew T Moon
Regulatory Specialist II
New Filing Section

FAX Aud. #: H16000271964
Letter Number: 716A00023748

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:FLORIDA LOGISTIC TRANS INC.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

10351 NW 127 STREETHALEAH GARDENS,FLORIDA 33018**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**LILIA FASSI - PRESIDENT**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Lilia Fassi10351 NW 127 StreetHialeah Gardens Florida 33018**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Lilia Fassi10351 NW 127 StreetHialeah Gardens Florida 33018

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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

* Lilia Farn 11/3/16
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.

* Lilia Farn 11/3/16
Incorporator Date

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