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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973

Fax Number : (385)675-5944

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Email Address:

# FLORIDA PROFIT/NON PROFIT CORPORATION

## PALOMARES TRANSPORT INC

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

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2 02/09/17

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In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
PALOMARES TRANSPORT INC
ARTICLE II PRINCIPAL OFFICE;
The principal street address and mailing address is:
12910 SON 10 TELEH- 33184 MIAMIFE
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
JOIGE L. PALOMAZEL -P =
LLA T
FEB HAA
THE PART OF
9.
35 S
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
Jorge / Palamares
12910 S. 10 Tena
MIOMI E1 33184
<u> </u>
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
12910 SW 10 Terr
Mionai F1 32124

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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

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

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Stage of

17 FEB -8 AM 9: 35
SEURE IARY OF STATE
TAIL AHASSEE, FLORIDA