Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : T20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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Email Addre	55 :	

FLORIDA PROFIT/NON PROFIT CORPORATION OJG TRUCKING INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF INCORPORATION

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

	ARTICLE I NAME: The name of the corporation is:
	OJG Trucking INC
	ARTICLE IL PRINCIPAL OFFICE:
*	
	The principal street address and mailing address is:
	291 6W 71 AVE
	HIAMI FL 33144
	100
ARTI	CLE III SHARES: The number of shares of stock is:
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
	Oseste LAZARO GARCIA (A) OSESTE LAZARO GARCIA CAMPO (VP)
	Out / Garcia Caupo (VP)
	LIDATA LATATO CIA CIA
	Useste LATARO GALCIA CARA
	Useste LAZARO CARCIA CALLA
	USESTE LAZARO CARCIA CENTO
	USESTE LAZARO CARCIA CARADO
	USESTE LATARO CARCIA CENTRA
	THE LEVEL DUTTAL REGISTERED AGENT AND STREET ADDRESS:
AI The	RTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: name and Florida street address (PO Box not acceptable) of the registered agent
AI The	RTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: name and Florida street address (PO Box not acceptable) of the registered agent Oreste Jose Garcia
AI The	RTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: name and Florida street address (PO Box not acceptable) of the registered agent Oreste Jose Garcia 291 Sw 71 ave
AII The	RTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: name and Florida street address (PO Box not acceptable) of the registered agent Oreste Jose Garcia
AII The	RTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: name and Florida street address (PO Box not acceptable) of the registered agent in the control of the segment of the
The	RTICLEV INITIAL REGISTERED AGENT AND STREET ADDRESS: name and Florida street address (PO Box not acceptable) of the registered agent Oreste Jose Garcia 291 Sw 71 ave Miami FL 33144 RTICLEVI INCORPORATOR: The name and address of the Incorporator
The	RTICLEV INITIAL REGISTERED AGENT AND STREET ADDRESS: name and Florida street address (PO Box not acceptable) of the registered agent Oreste Jose Garcia 291 Sw 71 ave Miami FL 33144
The	RIICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: name and Florida street address (PO Box not acceptable) of the registered agent Oreste Jose Garcia 291 Sw 71 ave MIAMI FL 33144 RIICLE VI INCORPORATOR: The name and address of the Incorporator

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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