

PI8 000024260

(Requestor's Name)

(Address)

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(Document Number)

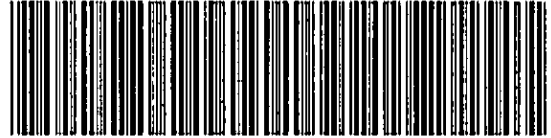
Certified Copies _____ Certificates of Status _____

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N. SAMS

MAR 15 2018



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18 MAR 14 PM 4:40
CLERK OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2018

PAYROLL AND TAX SERVICES LLC
2100 W 76 STREET SUITE 408
HIALEAH, FL 33016

SUBJECT: THE LIS TRANSPORT INC
Ref. Number: W18000020647

FILED
18 MAR 14 PM 4:49
Division of State
TALLAHASSEE, FLORIDA

We have received your document for THE LIS TRANSPORT INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is .

P13000041713

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 818A00004305

COVER LETTER

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

SUBJECT: The LisgTransport Inc

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Payroll and Tax Services LLC

Name (Printed or typed)

2100 W 76 Street Suite 408

Address

Hialeah, FL 33016

City, State & Zip

786-401-7873

Daytime Telephone number

Payroll_Tax_Service@outlook.com

E-mail address: (to be used for future annual report notification)

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

Raul Guilarte

12951 Port Said Road Unit 16

Opa Locka, FL 33054

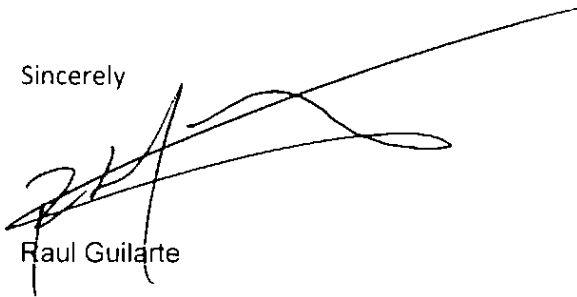
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18 MAR 14 PM 4:40
TALLAHASSEE, FLORIDA

To whom it may concern;

I Raul Guilarte, president of The LIS Transport Inc. (Document # P15000001699) will not be renewing above corporation for 2017. I am asking The Florida Department of Corporation to dissolve The LIS Transport Inc. (Document # P15000001699). I would like to reopen a new corporation under the same name as per attached documents.

Should you have any question please contact me at the 786-385-5252.

Sincerely

A handwritten signature in black ink, appearing to be 'Raul Guilarte', with a long horizontal line extending from the end of the signature.

Raul Guilarte

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: The Liss Transport Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

12951 Port Said Road Unit 16

Opa Locka, FL 33054

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Guilarte, Raul (President)

Name and Title: _____

Address 12951 Port Said Road Unit 16

Address: _____

Opa Locka, FL 33054

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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2018 MAR 14 AM 8:25

DEPARTMENT OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

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18 MAR 14 PM 4:40
TALLAHASSEE, FLORIDA

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: Guilare, Raul

Address: 12951 Port Said Road Unit 16

Opa Locka, FL 33054

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18 MAR 14 PM 4:51
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Guilarte, Raul

Address: 12951 Port Said Road Unit 16

Opa Locka, FL 33054

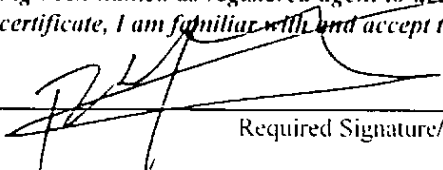
ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 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

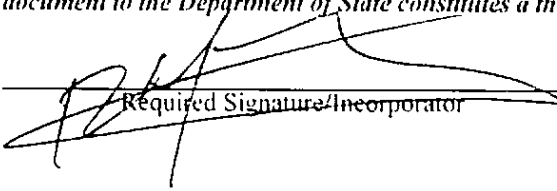


Required Signature/Registered Agent

02/19/2018

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.



Required Signature/Incorporator

02/19/2018

Date