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.

(((H18000094076 3)))



H;80000940763ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

	Division of Co	porations	
	Fax Number	: (850)617-6381	Alti
From:			MAR CARE LAH
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	>= N
	Account Number	: I20000000019	55. 6
	Phone	: (305)552-5973	E
	Fax Number	: (3 0 5)675-5944	
			ب کریں
Enter	the email address	for this business entity to be used for	futur 😅 💆 🗲
anr	nual report maili	: (305)675-5944 s for this business entity to be used for a ngs. Enter only one email address please.	• 05

RECEIVED 2018 MAR 26 PM 5: 0

FLORIDA PROFIT/NON PROFIT CORPORATION

AmericaMaxPro Logistics Corp

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

N. SAMS

MAR 27 2018

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:		
America MaxPro Logistics Corp.		
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is:		
266 F 20th st, Hialagh FL 33010.		
ARTICLE III SHARES: The number of shares of stock is:		
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
Ernesto Hechavarria Balloga (P)		•
	==	
	8 MAR	٠.,
HANGE CONTRACTOR OF THE PARTY O	\sim	
	6 PM	s ∏i'
	ယ္	
	90	
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:		
The name and Florida street address (PO Box not acceptable) of the registered agent is:		
Frnesto Hechavarria Ballaga		
200 E 2011 St		
Higlegh FL 33010		
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:		
Ernesto Hechavarnia Balla	icki	Į.
266 E 20th ST		
Higlegh FL 33010		

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 Agricultural Registered Registered

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.

Incorporat

3/23/18 Date

MAR 26 PM 3: 06