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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
BEST TRANSPORT CARE, INC**

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

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FLORIDA DEPARTMENT OF STATE
DIVISION OF COMMERCIAL SERVICES

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Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:BEST TRANSPORT CORP, INC**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

10467 SW 210 TH TERCUTLER BAY FL 33189**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**JUAN GASCA DIAZ(P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

JUAN GASCA DIAZ10467 SW 210 TERCUTLER BAY FL 33189**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:JUAN GASCA DIAZ10467 SW 210 TERCUTLER BAY FL 33189FILED
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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

James P. [Signature]
Registered Agent

5/11/18
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.

James P. [Signature]
Incorporator

5/11/18
Date

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