

P18000070641

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.

((H18000240218 3)))



H180002402183ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

SLC/STP/STP
FALL 2018

17 AUG 16 PM 4: 39



FLORIDA PROFIT/NON PROFIT CORPORATION ALL AROUND TRANSPORTATION & DELIVERIES CORP

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

Electronic Filing Menu

Corporate Filing Menu

Help

H18000240218

ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)**ARTICLE I NAME:** The name of the corporation is:All around transportation & deliveries**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

5010 NW 2ave
Miami, FL 33127SECRET
TALLAHASSEE

17 AUG 16 PM 4:33

FILED

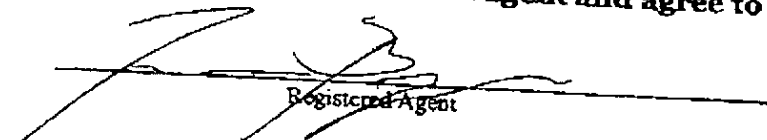
ARTICLE III SHARES: The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Luraine Depri Burgess (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**
The name and Florida street address (PO Box not acceptable) of the registered agent is:Luraine Depri Burgess
5010 NW 2ave
Miami, FL 33127**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Luraine Depri Burgess
5010 NW 2ave
Miami, FL 33127

H18000240218

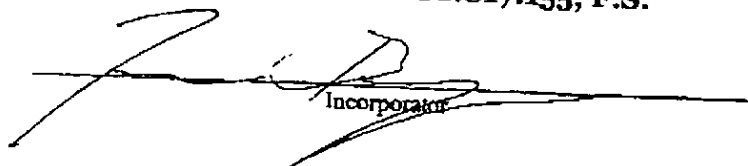
H18000240218

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
08-16-18
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.


Incorporator
08-16-18
Date

FILED
17 AUG 16 PM 4:33
S. Ct. Sec. 1
TALLAHASSEE

H18000240218