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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

: (305)552-5973

Phone Fax Number

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FLORIDA PROFIT/NON PROFIT CORPORATION LOGISTICS TRUCKING INC

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

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Help

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:	
Logistics Trucking inc	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
migmi, Ft, 33165	
ARTICLE III SHARES: The number of shares of stock is: (06	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
- Yassiel Cabre (P)	
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	ב נק
35 35 35 35 35 35 35 35 35 35 35 35 35 3	
ARTICLE V INITIAL REGISTERED ACENT AND COMPANY	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
VOSSIEL CARE	
2522 SW 113 CT	
Miami FL 33165	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
- JOSSIEL CABRE	
- 2522 SN 113 CT.	
MIGMI FL 33105	

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