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.

(((H19000181293 3)))



H190001812933ABC1

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 : (305)552-5973 : (305)675-5944 Fax Number

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

Email Address:

## FLORIDA PROFIT/NON PROFIT CORPORATION **UBS TRANSPORT INC.**

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

Electronic Filing Menu Corporate Filing Menu

Help

N CULLIGAN JUN 10 2019

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

FILED

19 JUN - 7 AM 9: 55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE I** NAME: The name of the corporation is:

UBS TRANSPORT INC.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
1581 W 49TH ST #148, HIALEAH, FL 33012
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
MARLENE AVEROFF (P)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
1581 W 49TH ST #148, HIALEAH FL 33012
MARLENE AVEROFF
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:  MARLENE AVEROFF
1581 W 49TH ST #148, HIALEAH, FL 33012

## Required Signatures:

3052201440

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

> Date Registered Agent

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.

> 05-07-2019 Date Incorporator