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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES INC.
Account Number : 07535000353
Phone : (800)221-2972
Fax Number : (718)889-7420

SECRETARY OF STATE
TALLAHASSEE, FL

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
FREIGHT SERVICE SALES INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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DEC 16 2019

2019 DEC 13 11:11 AM

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME
The name of the corporation shall be: FREIGHT SERVICE SALES INC

ARTICLE II PRINCIPAL OFFICE
Principal street address: 2338 IMMOKALEE RD STE 401
Mailing address, if different is: 2338 IMMOKALEE RD STE 401
NAPLES, FL 34110 NAPLES, FL 34110

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: FREIGHT
To engage in any lawful act or activity for which corporations may be organized.

ARTICLE IV SHARES
The number of shares of stock is: 200 NPV

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alexander Valente, Director Name and Title: _____
Address: 2338 IMMOKALEE RD STE 401 Address: _____
NAPLES, FL 34110 _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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TALLAHASSEE, FL

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Alexander Valente
 Address: 2338 IMMOKALEE RD STE 401
NAPLES, FL 34110

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alexander Valente
 Address: 2338 IMMOKALEE RD STE 401
NAPLES, FL 34110

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

X 
 Required Signature/Registered Agent

12/13/19
 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.

X  Pres
 Required Signature/Incorporator

10/4/19
 Date