

P20000046789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

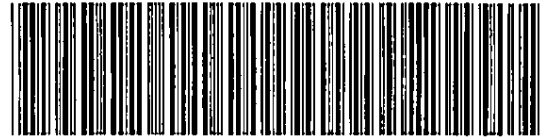
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: NRN Logistics, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: John Jaundoo
Name (Printed or typed)

2750 Forest Hills Blvd., Apt. 111
Address

Coral Springs, FL 33065
City, State & Zip

954-512-7805
Daytime Telephone number

jjaundoo74@gmail.com
E-mail address: (to be used for future annual report notification)

CLERK OF STATE
TALLAHASSEE, FL

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NOTE: Please provide the original and one copy of the articles.

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: NRN Logistics, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address	Mailing address, if different is:
<u>2750 Forest Hills Blvd.</u>	_____
<u>Apt. 111</u>	_____
<u>Coral Springs, FL 33065</u>	_____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>John Jaundoo, President</u>	Name and Title: _____
Address: <u>2750 Forest Hills Blvd.</u>	Address: _____
<u>Apt. 111</u>	_____
<u>Coral Springs, FL 33065</u>	_____

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

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

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OFFICE OF STATE
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: John Jaundoo
 Address: 2750 Forest Hills Blvd., Apt. 111
Coral Springs, FL 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: John Jaundoo
 Address: 2750 Forest Hills Blvd., Apt. 111
Coral Springs, FL 33065

DEPARTMENT OF STATE
 TALLAHASSEE, FL
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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: May 25, 2020. (OPTIONAL)

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

_____ John Jaundoo _____ 5/25/20 _____
 Required Signature/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.

_____ John Jaundoo _____ 5/25/20 _____
 Required Signature/Incorporator Date