8/17/2020

Division of Corporations 62263

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

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

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## FLORIDA PROFIT/NON PROFIT CORPORATION COUNTRIES LOGISTICS EXPRESS INC

Certificate of Status	0
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Help

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

The name of the corporati	on shall be: COUNTRIES LOGISTIC	S EXPRESS INC		
ARTICLE II PRINCIPAL OFFICE Principal street address		Mailing ad	Mailing address, if different is:	
8921 NEWMARKET DR				
WINDERMERE, FL 347	86			
ARTICLE III PURPO The purpose for which th	SE se corporation is organized is: ANY AND	ALL LAWFUL BUSINESS.		
			20	
		***************************************		
<u></u>			:	
ARTICLE V INITIAL  Name and Title:  Address	Stock is: 100  LOFFICERS AND/OR DIRECTORS  YOHANN ALEJANDRO GELDER (P)  5032 SOUTHAMTON CIR  TAMPA, EL 33547	Name and Title:Address:		
Name and Title:	AQUILES HAZAEL MAESTRE (V/P)  8921 NEWMARKET DR  WINDERMERE, FL 34786			
Name and Title:		Name and Tale:		

Name and T	tle:	Name and Title:	
Address		Address:	
ARTICLE VI REC	GISTERED AGENT In street address (P.O. Box NOT acceptable)	of the registered agent is:	
	YOHANN ALEJANDRO GELDER		
Address: _	5032 SOUTHAMTON CIR		
_	TAMPA, FL 33642	_	
ARTICLE VII IN	<u>CORPORATOR</u>		
The name and addre	ss of the Incorporator is:		
Name:	YOHANN ALEJANDRO GELDER	_	
Address:	5032 SOUTHAMTON CIR		
	TAMPA, FL 33642		
ARTICLE VIII EI Effective date, if oth (If an effective date filing.)	FFECTIVE DATE:  or than the date of filing:  is listed, the date must be specific and car	. (ОРПОNA) anot be more than five days	L) prior or 90 days after the
Note: If the date inst the document's effect	erted in this block does not meet the applica tive date on the Department of State's recon	ble statutory filing requirements.	nts, this date will not be listed as
Having been named certificated am fam	as régistered agent to accept service of proces liar with and accept the appointment as regis	is for the above stated corpora stered agent and agree to act i	n this capacity
地区	왕 - 선		8/14/2020
7	Required Signature/Registered Agent		f /Date
I submit this docum document to the Dep	ent and affirm that the facts stated herein t artment of State constitutes a third degree fe	ire true. I am aware that the lony as provided for in s.847, l	false information submitted in a 55, F.S.
100	** * **		8/14/2020
Required Signature/	исогрогатог		Date