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.

(((H20000358192 3)))



H200003581923ABC/

To:	Division of Corporations
	Fax Number : (850)617-6381
From:	Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I200000000019
	Phone : (305)552-5973 Fax Number : (305)675-5944
Ent	er the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

FLORIDA PROFIT/NON PROFIT CORPORATION SPEED BOX CARGO EXPRESS, INC

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

I THE BALL THE

RTICLE I NAME ne name of the corporation	SPEED BOX CARGO EX	PRESS, INC	<u> </u>		<u> </u>
RTICLE II PRINCI		Mailing address, if different is:			
515 NW 72nd AVE.		2515 NW 72nd AVE.			
IIAMI, FL 33122		MIAMI, FL 33122			
RTICLE III PURPO he purpose for which the	e corporation is organized is:		·		
					2020 OCT
				•	-
		· · · · · · · · · · · · · · · · · · ·			HG
ARTICLE IV SHAR	<u>ES</u> 100			JAII FL	
The number of shares of	AL OFFICERS AND/OR DIRECTO		VP: GERM	AN J. MOREN	
The number of shares of	AL OFFICERS AND/OR DIRECTO	Name and Title:	VP: GERM 2515 NW 7	-	
The number of shares of ARTICLE V INITIA Name and Titl	AL OFFICERS AND/OR DIRECTO P: LEIDY K. SILVA SILVA	Name and Title:		2nd AVE.	
Name and Titl Address	AL OFFICERS AND/OR DIRECTOR P: LEIDY K. SILVA SILVA e: 2515 NW 72nd AVE.	Name and Title: Address:	2515 NW 7	2nd AVE.	O P.
The number of shares of ARTICLE V INITIA Name and Titl Address	P: LEIDY K. SILVA SILVA 2515 NW 72nd AVE. MIAMI, FL 33122	Name and Title: Address: Name and Title:	2515 NW 7	2nd AVE.	O P.
The number of shares of ARTICLE V INITIO Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTOR P: LEIDY K. SILVA SILVA 2515 NW 72nd AVE. MIAMI, FL 33122	Name and Title: Address: Name and Title: Address: Address:	2515 NW 7	33122	O P.

Name and	i Title:	Name and Title:	
Address		Address:	
		·	
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptabl	e) of the registered agent is:	
Name:	LEIDY K. SILVA SILVA		
Address:	2515 NW 72nd AVE.		
Address.	MIAMI, FL 33122		
A DELCT CAR	INCORDORATOR		
	INCORPORATOR ddress of the Incorporator is:		2020 00
Name:	LEIDY K. SILVA SILVA		000
Address:	2515 NW 72nd AVE.	_ _	- -
rium voo.	MIAMI, FL 33122		
mee	EFFECTIVE DATE: 10/13/2020 fother than the date of filing:	(OPTIONAL)	
(If an effective filing.)	date is listed, the date must be specific and c	annot be more than five days prior	or 90 days after the
Note: If the dat	e inserted in this block does not meet the application	cable statutory filing requirements, thi	s date will not be listed as
the document's	effective date on the Department of State's reco	ords.	
Having been no	amed as registered agent to accept service of pi i am familiar with and accept the appointment	rocess for the above stated corporations as registered agent and agree to act in	n at the place designated in this capacity
this certificate.	CIONSIM		10/13/2020
	Required Signature/Registered Ager	t	Date
I submit this de	ocument and affirm that the facts stated herei e Department of State constitutes a third degree	n are true. I am aware that the false e felony as provided for in s.817.155, l	information submitted in 6 F.S.
aocument to te	accument to the perpendicular of State Conference of the Conferenc		10/13/2020
Req	uired Signa ure/Incorporator		Date