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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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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
BOLD TRANSPORT CORP

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

2020 OCT 19 PM 4:26

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)**ARTICLE I NAME:** The name of the corporation is:BOLD Transport Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

15230 SW 307 Rd
Homestead, FL 33033**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**DENISleidy Pupo P
DENIS ALVAREZ DIAZ VP**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

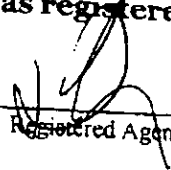
The name and Florida street address (PO Box not acceptable) of the registered agent is:

DENISleidy Pupo
15230 SW 307 Rd
Homestead, FL 33033**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:DENISleidy Pupo
15230 SW 307 Rd
Homestead, FL 33033

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Required Signatures:

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



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.



Incorporator

Date

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STATE
OF FL