

P200000 93541

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Sept. (2)

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To:

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

From:

Account Name : SUPER TAX PLUS II SERVICES LLC
Account Number : I20170000027
Phone : (305)603-9524
Fax Number : (555)555-5555

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

Email Address: Expressmulti services corp@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Rapid Run Auto Transport, CORP

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

G. R. R. R.
DEC 1, 2010

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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:

Rapid Run Auto Transport, Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

9450 Live Oak PL
Suite 408

DAVIE, FL 33324

Mailing address, if different is:

Same

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 Shares of Common stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Eda Rivera P

Address

9450 Live Oak PL

Suite 408

DAVIE, FL 33324

Name and Title:

Ednelisse Felix VP

Address:

9450 Live Oak PL

Suite 408

DAVIE, FL 33324

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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: Eda Rivera

Address: 9450 Line Oak Pl Ste 408
DAVIE, FL 33324

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Eda Rivera

Address: 9450 Line Oak Pl Ste 408
DAVIE, FL 33324

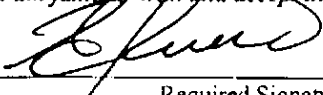
ARTICLE VIII EFFECTIVE DATE:

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 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



Required Signature/Registered Agent

Nov. 4 / 20
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.


Required Signature/Incorporator

Date

Nov. 4 / 20