

P21000050032

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
ADAK SERVICES & LOGISTIC, INC

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

2021 MAY 26 PM 12:32

2021 MAY 25 PM 5:00

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: ADAK SERVICES & LOGISTIC, INC**ARTICLE II PRINCIPAL OFFICE**Principal street address10800 NW 100 STSTE 12MEDLEY, FL 33178

Mailing address, if different is:

10800 NW 100 STSTE 12MEDLEY, FL 33178**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: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: P: JESUS M. ZAMBRANOAddress: 10800 NW 100 STSTE 12MEDLEY, FL 33178Name and Title: VP: LUIS M. ZAMBRANOAddress: 10800 NW 100 STSTE 12MEDLEY, FL 33178

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

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: JESUS M. ZAMBRANO
Address: 10800 NW 100 ST. STE 12
MEDLEY, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JESUS M. ZAMBRANO
Address: 10800 NW 100 ST. STE 12
MEDLEY, FL 33178

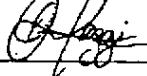
ARTICLE VIII EFFECTIVE DATE: 05/25/2021

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

X  _____ 05/25/2021
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.

X  _____ 05/25/2021
Required Signature/Incorporator Date