2100007459

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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 08/17/2021	₩WALK IN
ENTITY NAME Bradstre	et Logistics Inc
DOCUMENT NUMBER_	
	PLEASE FILE THE ATTACHED AND RETURN
xxxxx	Plain Copy Certified Copy
	Certificate of Status
***************************************	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY** Certified Copy of Arts & Amendments
	APOSTILLE' / NOTARIAL CERTIFICATION
COUNTRY OF DESTINATI NUMBER OF CERTIFICAT	DN
TOTAL OWED \$70.00	ACCOUNT #: 120160000072
Please call Tina at the	above number for any issues or concerns. Thank you so much!



August 18, 2021

SUNSHINE STATE

CORRECTED
Please Allow For
Same File Date

SUBJECT: BRADTSTREET LOGISTICS INC.

Ref. Number: W21000114065

We have received your document for BRADTSTREET LOGISTICS INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III

Letter Number: 121A00019784

PI :SIMM PI DUA ISBS

RECEIVED

www.sunbiz.org

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

ARTICLE II PRIN	CIPAL OFFICE		
IN TOUCH THE	Principal street address	:	Mailing address, if different is:
5987 Derby Dr			
Medina, OH 44256			
ARTICLE III PURI The purpose for which	the corporation is organized is:		
			5 5 5
			() () () () () () () () () () () () () (
			FL AT SO
ARTICLE IV SHA The number of shares of	<u>RES</u> 100 of stock is:		
The number of shares of	IAL OFFICERS AND/OR DIRECTO	<u>ORS</u>	
The number of shares of article V INIT	IAL OFFICERS AND/OR DIRECTO	ORS Name and Title	
The number of shares of shares of article V INIT Name and Ti	of stock is: IAL OFFICERS AND/OR DIRECT Scott Bradley, President	ORS Name and Title	
The number of shares of ARTICLE V INIT Name and Ti Address	Scott Bradley, President 5987 Derby Dr Medina, OH 44256	ORS Nume and Title Address:	
The number of shares of ARTICLE V INIT Name and Ti Address	Scott Bradley, President 5987 Derby Dr Medina, OH 44256	ORS Name and Title Address: Name and Title	
The number of shares of ARTICLE V INIT Name and Ti Address Name and Tit	of stock is: IAL OFFICERS AND/OR DIRECTOR Scott Bradley, President 5987 Derby Dr Medina, OH 44256	ORS Name and Title Address: Name and Title Address: Address:	
Name and Ti Address Name and Tit Address	of stock is: IAL OFFICERS AND/OR DIRECTOR Scott Bradley, President 5987 Derby Dr Medina, OH 44256	ORS Name and Title Address: Name and Title Address: Name and Title Name and Title	

Name ar	nd Title:	Name and Title:	
Address	s	Address:	
	<u>REGISTERED AGENT</u> Jorida street address (P.O. Box NOT acce	otable) of the registered agent is:	
Name:	Registered Agents Inc.	33 33	
Address:	7901 4th St N STE 300		•
	St. Petersburg, FL 33702	EECKETARY OF TALLAHASSE	i
ARTICLE VII	INCORPORATOR	E ST &	
The name and a	address of the Incorporator is:	FL 53	
Name:	Scott Bradley		
Address:	5987 Derby Dr		
	Medina, OH 44256		
Effective date i	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific ar	. (OPTIONAL) nd cannot be more than five days prior or 90 days after the	
Note: If the date the document's	te inserted in this block does not meet the ap effective date on the Department of State's	pplicable statutory filing requirements, this date will not be listed as records.	;
Having been na this certificate, j	nmed as registered agent to accept service of I am familiar with and accept the appointm	of process for the above stated corporation at the place designated ent as registered agent and agree to act in this capacity	in
Bill	Jame	8-16-2021	.
	Required Signature/Registered A	gent Date	
I submit this do	ocument and affirm that the facts stated ho e Department of State constitutes a third dep	erein are true. I am aware that the false information submitted in gree felony as provided for in s.817.155, F.S.	a
	A A A A A A A A A A A A A A A A A A A	8-16-2021	
Req	uired Signature/Incorporator	Date	•