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.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

Email	Address:			
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FLORIDA PROFIT/NON PROFIT CORPORATION TRANSPORTES Z.C. CORP

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

Transportes 2.c. Corp
ARTICLE U PRINCIPAL OFFICE:
The principal street address and mailing address is:
west miami Florida 33144
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Carlos Alberto 2abaleta Grajale: P. Yorman Esneider campos beltran YP
Yorman Esneider campos beltian YP
2 ⁿ 2
ARTICLE V INITIAL REGISTERED AGENT AND STREET ALIDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
Carlos Alberto Zabateta Grajalesz
6320 Sw 8th St Apt 459
West miami Florida 33144
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
Carlos Alberto Zabaleta Grajales
6320 SW 8th St Apt 459
west miami Florida 33144
<u> </u>

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

Carlos Zabalda Grajales 11/08/2021
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.

Carlos Zabaleta Grajales 11/08/2021
Incorporator Date