# P220000009398

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| W220001/3896                            |  |  |  |  |

Office Use Only



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2022 AUG 23 PM 8: 17 SECRETARY OF STATE TALLAHASSEE, FL

### **COVER LETTER**

Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:

Changing Company Domicile to Florida

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication \$ 50.00

Articles of Incorporation and Certified Copy <u>\$ 78.75</u>

Total filing fee \$128.75

OPTIONAL:

Certificate of Status \$ 8.75

From:

Miss Logistics LLC

Name (printed or typed)

1317 Edgewater Dr #3039

Address

Orlando, FL 32804

City, State & Zip

813-486-1349

**Daytime Telephone Number** 

afrancis@misslgc.com

E-mail address: (to be used for future annual report notification)

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## Articles of Domestication Foreign Corporation Domesticating to Florida

| The undersigned, Ashley Francis |   | Managing Director                       |  |  |
|---------------------------------|---|---|--|--|
|                                 | (Name)  | (Title)                                 |  |  |
| of Mi                           | ss Logistics LLC  | , a foreign                             |  |  |
| corpo                           | ration, in accordance with s. 607.11922, Flo  | rida Statutes, submit these Articles of |  |  |
|                                 | stication.  |   |  |  |
| 1.                              | Then name of the domesticating corporation is Miss Logistics  |   |  |  |
|                                 |   | (Foreign Corporation)                   |  |  |
| 2.                              | The jurisdiction and date of its formation is Missouri, 03/10/21  |   |  |  |
| 3.                              | 3. The name of the domesticated corporation is Miss Logistics   |   |  |  |
| 4.                              | The jurisdiction of formation of the domes  | sticated corporation is <b>Florida</b>  |  |  |
| 5.                              | . The domestication corporation is a foreign corporation and the domestication was approved in accordance with its organic law. |   |  |  |
| 6.                              | Attached are Florida Articles of Incorporat requirements pursuant to s.607.0202, F.S.   |   |  |  |
| l certi                         | fy I am authorized to sign these Articles of D  | nly /                                   |  |  |
|                                 | (Auth   | norized Signature)                      |  |  |

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SECRETARY OF STATE
TALLAHASSEE

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

| ARTICLE I NAME   |  |              |                                       |
|--|--|--------------|---------------------------------------|
| THE NAME OF THE CORPORATION SHALL BE:                                  |  |              |                                       |
| Miss Logistics INC   |  | _            |                                       |
| ADDICE II DOINCIDAL OPPICE   |  |              |                                       |
| ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/ MAILING A |  |              |                                       |
|  |  |              |                                       |
| Principal Address 1317 Edgewater Dr #3039 Orlando, FL 32804            | Mailing Address<br>1317 Edgewater Dr #3039 Orlando, FL 32804 |              |                                       |
| Total Edgettate St. 10000 Gridings, 1 20200 .                          |  | _            |                                       |
|  |  | -            |                                       |
|  |  |              |                                       |
|  |  | -            |                                       |
| ARTICLE III PURPOSE  |  |              |                                       |
| THE PURPOSE FOR WHICH THE CORPORATION                                  | IS ORGANIZED:  |              |                                       |
| For profit company, transportation business.                           |  |              |                                       |
|  |  | <del></del>  |                                       |
| ARTICLE IV SHARES  |  |              |                                       |
| THE NUMBER OF SHARES OF STOCK IS: 100                                  |  |              |                                       |
|  | <del></del>  |              |                                       |
|  | ENT AND STREET ADDRESS                                       |              |                                       |
| THE NAME AND FLORIDA STREET ADDRESS (                                  | P.O. BOX <b>NOT</b> ACCEPTABLE) OF THE REGIST                | ERED AGE     | NT IS;                                |
| Registered Agents Inc.   |  | ع رب         | ≥                                     |
|  |  | ECI<br>TAI   | 107 Aug 23                            |
| 7901 4th St N, STE 300 St. Petersburg , FL 33702                       |  |              |                                       |
|  |  | AR<br>YEA    | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
|  |  | (V)          | ਹ ਹੈ।<br>ਹਿਲ੍ਹੇ                       |
| HAVING BEEN NAMED AS REGISTERED AGE                                    | የህር ላህነን ተረነ ልዕረድው፣ የድድህነሪድ ብድ የውሰረድና                        | - iforia - I | <b>X</b>                              |
| ABOVE STATED CORPORATION AT THE PLACE                                  |  |              |                                       |
| WITH AND ACCEPT THE APPOINTMENT AS R                                   |  |              | 20                                    |
| CAPACITY.  |  |              |                                       |
| Bell Name -  |  |              |                                       |
|  |  | 16/2022      |                                       |
| Signature/Registered Agent   | Date   |              |                                       |

### ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: Name & Title: Ashley Francis Name & Title: Managing Director Address: Address: 1317 Edgewater Dr #3039 Orlando, FL 32804 Name & Title: Name & Title: Address: Address: Name & Title: Name & Title: Address: Address: Name & Title: Name & Title: Address: Address: I submit this document and affirm that the facts stated herein are true. I am aware that 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. 08/16/2022 Signature/Authorized Person