

P 22000075085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

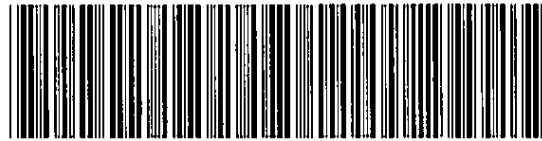
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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S. CHATHAM

SEP 30 2022

09/29/22--01003--008

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
SEP 29 PM 3:11

RECEIVED  
2022 SEP 29 PM 2:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Johnson Family Logistics, Inc.

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
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**From:** Scot B. Copeland, Esq.

Name (printed or typed)

195 Grand Boulevard, Suite 101

Address

Miramar Beach, FL 32550

City, State & Zip

(850) 460-8000

Daytime Telephone Number

beeasy52@gmail.com

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

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

JOHNSON FAMILY LOGISTICS, INC

Signature \_\_\_\_\_

Requested by: SETH

09/27/22

Name

Date

Time

Walk-In

Will Pick Up

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

Articles of Domestication  
Foreign Corporation Domesticating to Florida

The undersigned, Brian Johnson, Director and President  
(Name) (Title)

of Johnson Family Logistics, Inc., a foreign  
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of  
Domestication.

1. Then name of the domesticating corporation is Johnson Family Logistics, Inc.  
(Foreign Corporation)  
\_\_\_\_\_
2. The jurisdiction and date of its formation is Virginia; July 20, 2021
3. The name of the domesticated corporation is Johnson Family Logistics, Inc.  
\_\_\_\_\_
4. The jurisdiction of formation of the domesticated corporation is **Florida**
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 Incorporation to complete the domestication  
requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.

  
(Authorized Signature)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE  
REGISTRATION  
JUL 23 PM 2:11

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

**ARTICLE I    NAME**

*THE NAME OF THE CORPORATION SHALL BE:*

Johnson Family Logistics, Inc.

**ARTICLE II    PRINCIPAL OFFICE**

*THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:*

<u>Principal Address</u>	<u>Mailing Address</u>
<u>1069 West Broad Street, #767</u>	<u>1069 West Broad Street, #767</u>
<u>Falls Church, VA 22046</u>	<u>Falls Church, VA 22046</u>

**ARTICLE III    PURPOSE**

*THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:*

The purpose of this corporation is to engage in any activity or business permitted under the State of Florida or any other applicable law.

**ARTICLE IV    SHARES**

*THE NUMBER OF SHARES OF STOCK IS: 5,000*

**ARTICLE VI    REGISTERED AGENT AND STREET ADDRESS**

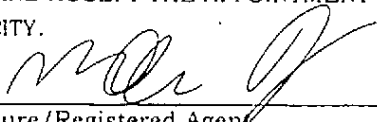
*THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:*

Malachi Johnson

1645 Adams Street

Hollywood, FL 33020

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

  
Signature/Registered Agent

9/25/2022

Date

22 SEP 29 PM 3:11  
SECRET  
DIVISION OF CORPORATE REGISTRATION

**ARTICLE V DIRECTORS AND/OR OFFICERS**

*THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:*

Name & Title: Brian Johnson, Director

Address: 1069 West Broad Street

#767

Falls Church, VA 22046

Name & Title: Kahmel Johnson, Director

Address: 1933 18th Street, Apt. 204

Santa Monica, CA 90404

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: Malachi Johnson, Director

Address: 1645 Adams Street

Hollywood, FL 33020

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_


Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
BUREAU OF CORPORATIONS

SEP 29 PM 3:11

**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.**

  
Signature/Authorized Person

9/24/2022  
Date