1/7/25, 8:17 AM

Division of Corporations

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Fax Number : (850)617-6381

From:

Account Name : CUSI CONSULTING, INC.

Account Number : I20230000150 : (786)616-3495 Fax Number : (305)714-3014

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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| CINGTI | Audi C33 | | ſ | - |

FLORIDA PROFIT/NON PROFIT CORPORATION

Estevez Truck Services, Corp.

| Certificate of Status | 0 |
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Help

From: Raul Chavez .

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Page: 2 of 3

01/07/2025 9:06 AM

ARTICLES OF INCORPORATION

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

| ARTICLE I NAME The name of the corporati | on shall be: Estevez Truck Se | ervices, Corp. | |
|---|-------------------------------------|-----------------|---------------------------|
| ARTICLE II PRINCI | | | address, if different is: |
| 8832 Atter Ln | | | |
| Jacksonville, FL | 32216 | | |
| ARTICLE III PURPO | <u>SE</u> | | |
| The purpose for which the | e corporation is organized is: Logi | stics | |
| | | | |
| | • | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | tock is: 1,000 | Name and Title: | 2921 JAN - 7 |
| Address | 8832 Atter Ln | Address: | 7 . 3 |
| | Jacksonville, FL 32216 | | - 10 E 10 |
| | | | 2 |
| | | | |
| Name and Title:_ | | Name and Title: | |
| Address | | Address: | |
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| Name and Title: | | Name and Title: | |
| Address | · | | |
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| Name an | d Title: | Name and Title: | | |
|--------------------------------------|--|---|-------------------------------|--|
| Address | | | | |
| Address | | Address: | | |
| | | | | |
| | | | | |
| | | | | |
| | REGISTERED AGENT | hla) of the registered event is: | | |
| | 51151 | - | | |
| Name: | | | | |
| Address: | 8832 Atter Ln | | | |
| | Jacksonville, FL 32216 | | | |
| ARTICLE VII | <u>INCORPORATOR</u> | | | |
| | Idress of the Incorporator is: | | | 2015 344 - 7 |
| Name: | Erick Estevez | | | <u>. </u> |
| | | . | | 1 |
| Address: | 8832 Atter Ln | | | |
| | Jacksonville, FL 32216 | | , vi <u>c</u> | PH 4: 21 |
| ARTICLE VIII | _EFFECTIVE DATE: | | | 24 |
| Effective date, if | other than the date of filing:late is listed, the date must be specific and | | | ave after the |
| filing.) | rate is usied, the date must be specific and | cannot be more than tive da | ys prior or 20 a | ays areer the |
| | inserted in this block does not meet the appli ffective date on the Department of State's rec | | nents, this date v | vill not be listed |
| | ned as registered agent to accept service of pro familiar with and accept the appointment as re | | | |
| | Enck Estury Required Signature/Registered Agen | | 1/6 | 5/2025 |
| | Required Signature/Registered Agen | t | | Date |
| I submit this doc document to the | ument and affirm that the facts stated herei Department of State constitutes a third degree | n are true. I am aware that t felony as provided for in s.81 | he fulse informa 7,155, F. | ition submitted |
| | Erick Estever | | 1/6 | 5/2025 |
| Required Signatu | ire/Incorporator | | ate | |