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LAZARUS CORPORATE FILING SERVICE, INC.  
(Requestor's Name)

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MIAMI, FLORIDA (305) 552-5973  
(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

100002838891--5  
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\*\*\*\*\*78.75 \*\*\*\*\*78.75

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99 APR 14 PM 12:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. J. C. B. TRANSPORT SERVICES, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input checked="" type="checkbox"/>	Reinstatement
<input checked="" type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

99 APR 14 AM 11:42  
DIVISION OF CORPORATION

RECEIVED

4/14

FILED

99 APR 14 PM 12:08

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

J.C.B. TRANSPORT SERVICES, INC.

### ARTICLE II PRICIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

MIAMI FLORIDA

1403 SW 107 th AVE.

MIAMI FL 33174

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding  
At any one time is:

100 shares

### ARTICLE IV INITIAL REGISTERED AGENT AND SRTEET ADDRESS

The name and address of the initial registered agent is:

HERNANDO G.DE PINERES

9650 SW 122 th AVE

MIAMI FL. ~~33174~~ 33186

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

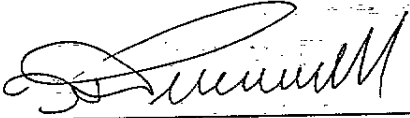

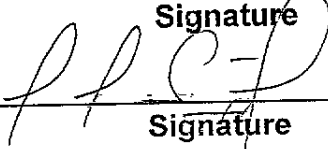
HERNANDO G. DE PINERES - 9650 SW 122 AVE.  
MIAMI, FL. 33186  
SONIA ALVAREZ - 1403 SW 107 AVE.  
MIAMI, FL. 33174  
SILVIA DE PINERES - 9650 SW 122 AVE.  
MIAMI, FL. 33186

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

HERNANDO G. DE PINERES	9650 SW 122 th AVE	PRE.
	MIAMI FLA 33186	
SONIA ALVAREZ.-	1403 SW 107 AVE	VP
	MIAMI FL 33174	
SILVIA DE PINERES.	9650 SW . 122 th AVE	
	MIAMI FL. 33186	ST

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 6<sup>th</sup> day of APRIL, 1999.

  
\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: J.C.B. TRANSPORT SERVICES, INC.

2. The name and address of the registered agent and office is:

HERNANDO G. DE PINERES

(NAME)

9650 SW. 122 AVE. MIAMI - FL 33186

(P.O. BOX NOT ACCEPTABLE)

MIAMI FL 33186

(CITY/STATE/ZIP)

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 HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE 

DATE 4/12/1999

REGISTERED AGENT FILING FEE: \$35.00