# TRANSMITTAL LETTER

Department of State Division of Corporation P. O. Box 6327 Callahassee, FL 3231	ons	0073	TALLAHA	SS AUG 12
SUBJECT:	NORTH AMERICAN FREIGHT CONSOLIDATORS, INC.  (Proposed corporate name - must include suffix)			
<b>\$70.00</b>	al and one(1) copy of the article  \$78.75 Filing Fee  & Certificate of Status	es of incorporation and a  \$\square\$	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
EDOM	ANTONIO FER	NANDEZ		
FROM:	Name (Printed or typed)			
	655 <b>W</b> . 83 <sup>RD</sup> S	TREET		
	Address HIALEAH, FL 33014		1000029585519 -08/12/9901092006 *****87.50 ******87.50	
	City, <b>305-490-7</b> :	State & Zip	The second secon	n Turniya di defişeren issa ili s

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

## ARTICLES OF INCORPORATION

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

#### ARTICLE I NAME

The name of the corporation shall be:

NORTH AMERICAN FREIGHT CONSOLIDATORS, INC.

## ARTICLE II PRINCIPAL OFFICE

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

655 W. 83RD STREET - HIALEAH, FL 33014

ARTICLE III SHARES

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

100

### INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial registered agent are:

**ANTONIO FERNANDEZ** 655 W. 83RD STREET - HIALEAH, FL 33014

### INCORPORATOR .

The name and address of the incorporator to these Articles of Incorporation are:

ANTONIO FERNANDEZ 655 W. 83<sup>RD</sup> STREET – HIALEAH, FL 33014

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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/Registered A