P2500000 3809

(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:

Office Use Only

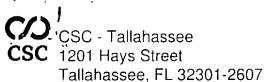


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850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563 Date: 01/21/25 Order #: 1778674-1

Re: Liberty Bulk Transport, Inc. Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$70.0 - FL State Account Number:

12000000195

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

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

JBJECT:	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u> I	UDE SUFFIX)
		•	; .
nclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
■ \$70.00 Fiting Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	S87.50. Filing Fee; Certified Copy & Certificate of
	ADDITIONAL COPY REQ		
Jen Jen	nnifer Vinciguerra, Paralegal		
FROM:		e (Printed or typed) Rd., Ste. 200	
FROM:	Nam Fox Rothschild LLP, 2800 Kelly	•••	
FROM: c/o 	Nam Fox Rothschild LLP, 2800 Kelly	Rd., Ste. 200	
FROM: c/o 	Nam Fox Rothschild LLP, 2800 Kelly rrington. PA 18976	Rd., Ste. 200	
FROM: c/o 	Nam Fox Rothschild LLP, 2800 Kelly rrington. PA 18976	Address State & Zip	
FROM: c/o Wa 	Nam Fox Rothschild LLP, 2800 Kelly rrington. PA 18976	Rd., Ste. 200 Address	

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

ARTICLES OF INCORPORATION

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

	Liberty Bulk Transport, Inc		
<u>RTICLE II — PRIN</u>	<u>CIPAL OFFICE</u> Principal street address	Mailing a	ddress, if different is:
30 Industrial Road		7110 E 14th Ave	
Carlstadt, NJ 07072		<u>Tampa, FL 3361</u>	9
	OSE the corporation is organized is: nay be organized under the Florida Bus		
	nized under the Florida Business Corpo		
uthority or by const			N 2
			1
			- 13
			5 5
Name and Tit	Melissa Eichholz - President,	Name and Title:	
Address	Secretary, Treasurer & Director	Address:	
	1 Carriage Hill Dr.		
	Colts Neck. NJ 07722		
Name and Title	<u> </u>	Name and Title:	
Address		Address:	
			
Name and Title	::	Name and Title:	<u> </u>
Name and Title	e:		

Name a	nd Title:	Name and Title:	
Addres	·s	Address:	
ARTICLE VI The name and I	<u>REGISTERED AGENT</u> Storida street address (P.O. Box NOT acceptabl	e) of the registered agent is:	
Name:	Corporation Service Company		
Address:	1201 Hays Street		20.
	Tallahassee. FL 32301		75 JA
ARTICLE VII	INCORPORATOR		1025 JAN 21 A
The name and a	address of the Incorporator is:		M S M D D D D D D D D D D D D D D D D D
Name:	Melissa Eichholz		
Address:	1 Carriage Hill Dr.		•
	Colis Neck, NJ 07722		
Effective date, i (If an effective filing.) Note: If the dat	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and ca e inserted in this block does not meet the applic effective date on the Department of State's reco	annot be more than five days prio able statutory filing requirements, t	
	med as registered agent to accept service of proc familiar with and accept the appointment as reg	istered agent and agree to act in thi	
	_Shawna Godbolt		Date
	cument and affirm that the facts stated herein Department of State constitutes a third degree f		
Decusioned by:			01/19/25
Required Shenat	ure/Incorporator	Date	
			PIN-9583