

P2500009328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

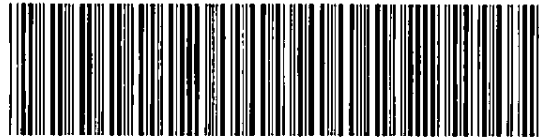
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

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

SUBJECT: Domestication Foreign to Florida (Keka Transportation, 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	\$ 78.75
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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From: BRANISLAV SEKULIC

Name (printed or typed)

80 WIDENER CT

Address

SAINT JOHNS, FL 32259 - 7087

City, State & Zip

605-277-569

Daytime Telephone Number

marin@cpajonjic.com

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

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Articles of Domestication
Foreign Corporation Domesticating to Florida

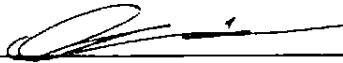
The undersigned, Branislav Sekulic President
(Name) (Title)

of KEKA TRANSPORTATION, 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 KEKA TRANSPORTATION, INC.
(Foreign Corporation)
KEKA TRANSPORTATION, INC.
2. The jurisdiction and date of its formation is ILLINOIS, 10/05/2021
3. The name of the domesticated corporation is KEKA TRANSPORTATION, 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.

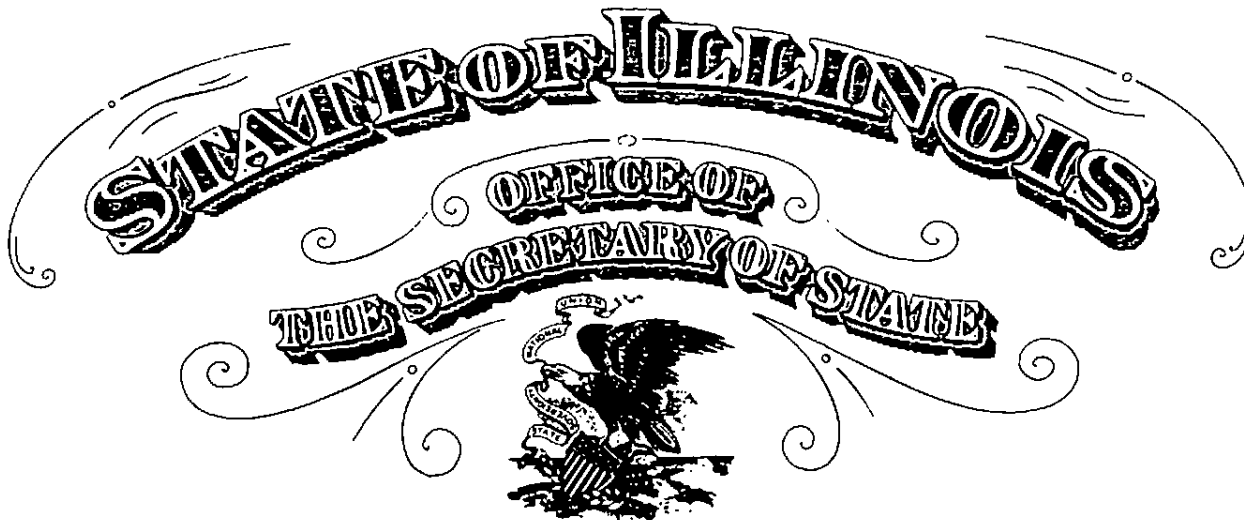


(Authorized Signature)

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TALLAHASSEE, FL

File Number

7345-179-5



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulas, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

KEKA TRANSPORTATION, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 05, 2021, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this 30TH
day of JANUARY A.D. 2025 .



Authentication #: 2503004358 verifiable until 01/30/2026
Authenticate at: <https://www.ilsos.gov>

Alexi Giannoulas
SECRETARY OF STATE

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SECRETARY OF STATE
TALLAHASSEE, FL

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

KEKA TRANSPORTATION, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address
80 WIDENER CT, SAINT JOHNS, FL 32259 - 7087

Mailing Address
80 WIDENER CT, SAINT JOHNS, FL 32259 - 7087

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

The transaction of any or all lawful businesses for which corporations may be incorporated under the Florida Business Corporation Act.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

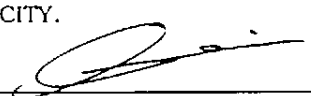
THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

BRANISLAV SEKULIC

80 WIDENER CT.

SAINT JOHNS, FL 32259 - 7087

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

1/30/2025
Date

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STATE
TALLAHASSEE
FL

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ARTICLE V DIRECTORS AND/ OR OFFICERS

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

Name & Title: BRANISLAV SEKULIC, President
Address: 80 WIDENER CT,
SAINT JOHNS, FL 32259 - 7087

Name & Title: _____
Address: _____

Name & Title: BRANISLAV SEKULIC, Secretary
Address: 80 WIDENER CT,
SAINT JOHNS, FL 32259 - 7087

Name & Title: _____
Address: _____

Name & Title: BRANISLAV SEKULIC, Treasury
Address: 80 WIDENER CT,
SAINT JOHNS, FL 32259 - 7087

Name & Title: _____
Address: _____

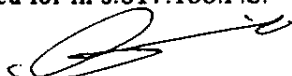
Name & Title: _____
Address: _____

Name & Title: _____
Address: _____

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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

01/30/2025

Date