306000005	470				
(Requestor's Name) (Address) (Address)	700078365247				
(City/State/Zip/Phone #)	02.417.400 01007001 **78.75				
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	RECTIVED 06 AUG 17 AH 9:31 Hohs				
Office Use Only	NOG-36 AUG 17 AM II: 31 Static Link of STAL				

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06 AUG 17 AM 11:31

SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section Division of Corporations

VAN LINES, INC. (Name of corporation - must include suffix) AAA SUBJECT:

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

EVA	CLAIR	BOWLE	S <u>sec</u>			
		(Na	ame of Person)	<u> </u>		
TRUCKING	4 ST	ART-UP	SERVICES	 _ ,		*
		(Fil	rm/Company)			
PO BOX	980		··			. 14 7 - 14
			(Address)		······	
CUMMING,	GA	30028		 .	-	<u></u> #_
		(City/	State and Zip code)			

For further information concerning this matter, please call:

CLAIRBaylesat7702050218(Name of Person)(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS: New Filing Section **Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

MAILING ADDRESS: New Filing Section **Division of Corporations** P.O. Box 6327

Tallahassee, FL 32314

Enclosed is a check for the following amount:

\$70.00 Filing Fee

X \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy

\$87.50 Filing Fee, Certificate of Status & Certified Copy



FILED 06 AUG 17 AM 11:31 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 17, 2006

EVA CLAIR BOWLES TRUCKING START-UP SERVICES P.O. BOX 980 CUMMING, GA 30028

SUBJECT: AAA VAN LINES, INC. Ref. Number: W06000036342

We have received your document for AAA VAN LINES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Doris Brown Document Specialist

Letter Number: 806A00050856

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1A	AA VAN	LINES	INC.	_		L'S B	1
	corporation; must Corp," "Inc," "Co		RPORATED," "C	OMPANY," "COR	PORATION,"	ETARY U HASSEE	
(If name unavai	ilable in Florida, e	nter alternate co	orporate name adop	ted for the purpose of	of transacting busin	ess in Plorida)	
2 GEOR	GIA		3	33-1087	1084	ORI	3
(State or country	y under the law of	which it is inco			nber, if applicable)		· · ·
4	12/11/200	>/	5.	PERPETU	42		
(Dat	te of incorporation	ı)	(Di	iration: Year corp. v		r "perpetual")	•
6							
7 2999				rida, if prior to regist 7.S., to determine pe 5 GEOR GIA		· · · · · · · · · · · · · · · · · · ·	<u>.</u>
1	INGINO		pal office address)	s acount			· ··
SAME							
		(Curren	nt mailing address)		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
8. Moroz (Purpose(CAPPICE (s) of corporation		HAE AN,	STORAC			• • • • •
9. Name and stre	et address of Flo	orida registerec	i agent: (P.O. Bo	x <u>NOT</u> acceptable	2)		
Name:	JONATH	AN Ra	bon	•	<u>.</u>		2.40 Pro
Office Address:	1357 1	5. LAFA	YETTE ST		jenna na .		4 • • • •
	TALLAH	ASSEE	· ··· ·- ·	, Florida _ 32.3	01	· · · ·	in terra
		(City)		(Zip co		· ·	

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



11. Attached is a dertificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

16-2005 09: 47A FROM:	86683 64742	TO:7708250746	P.2
12. Names and business addresses of officers a	and/or directors:	_	FILED
A. DIRECTORS		0	6 AUG 17 AM 11: 32
Chairman: REBECCA PAZ	• • •	SE	CALIARY OF STALL
	VE NORCEOSS,		
Vice Chairman:			
Address:	- / <u>// </u>		- <u></u> .
Diroclor: ISRAEL ROSH			
Address: 2999 PACIFIC [DRIVE NORCEOSS	, GA 3007/	
Director: SHLOMO PAZ	······································		
Address: 2999 PACIFIC DRIS	VE NORCROSS	GM 30071	
CEO President: <u>REB ECCA PAZ</u> Address: <u>2999 PACIFIC D</u>	RIVE NORCHOSS	, GA 30071	
CFO /SRAEL ROSH			
Address: 2999 PAC	PNIVE Norcre	033 GA 30071	
Secretary: SHLOMO PAZ		·····	
Address: 2999 PACIFIC DRI	VE NOREROSS,	GA 30071	
Treasurer:		· · · · · · · · · · · · · · · · · · ·	
Address:	<u> </u>		
NOTE: If necessary, you may attach an adden	dum to the application listing :	additional officers and/or dir	ectors.
()			
13(Signature of Director or	Officer listed in number 12 of	the application)	
(Signature of Director or 14 Shlomo Poz - Sec	Officer listed in number 12 of ICHOCY e and capacity of person signing		

L-J30 6005/005 E-328

а к. к. м

