

P19000068964

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000267995 3)))



H190002679953ABCF

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 12000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FILED
DIVISION OF STATE
CORPORATIONS
19 SEP -6 PM 3:23

FLORIDA PROFIT/NON PROFIT CORPORATION
MEKAR TRANSPORT CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

C RICO
SEP 06 2019

2019 SEP -6 PM 3:59

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

MEKAR TRANSPORT CORP.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

14411 Commerce way #225
MIAMI LAKES, FL. 33016

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

CARLOS EDUARDO MENDOZA (P)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 SEP -6 PM 3:23

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

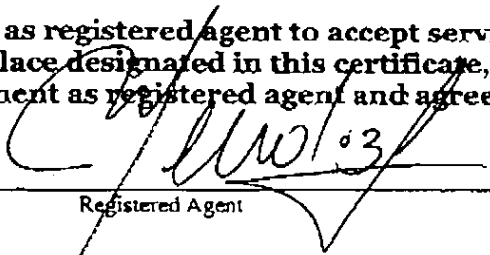
CARLOS EDUARDO MENDOZA
14411 Commerce way #225
MIAMI LAKES FL 33016

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

CARLOS EDUARDO MENDOZA
14411 Commerce way #225
Miami Lakes FL 33016

Required Signatures:

Having been named as registered agent 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

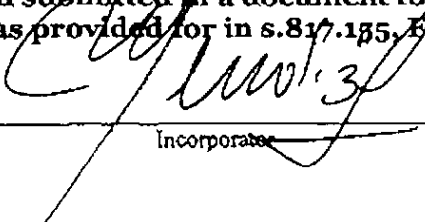


 Registered Agent

 Date

09/06/19

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.135, F.S.



 Incorporator

 Date

09/06/19