

F23000003631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

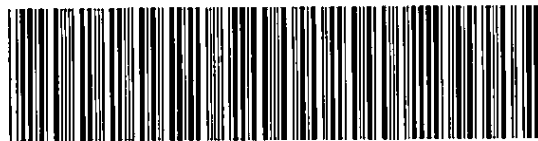
(Document Number)

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2023 APR 25 PM 3:26

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MAR 06 2023



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 23, 2023

SHIRLEY E. RODRIGUEZ
1805 CONNIE AVE S
LEHIGH ACRES, FL 33876 US

SUBJECT: AGK TRANSPORT CORP
Ref Number W23000639036

We have received your document for AGK TRANSPORT CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc. Co.," or "Corp. Please enter the alternate corporate name in the space provided in number one of the application.

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 re-filing of your document, please call (800) 745-6031.

Andrea Andrews
Regulatory Specialist II

Letter Number: 123A00006750

RECEIVED
APR 25 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AGK TRANSPORT CORP

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" 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:

SHIRLEY E. RODRIGUEZ

Name of Person

AGK TRANSPORT CORP

Firm/Company

1605 CONNIE AVE S

Address

HIGH ACRES, FL 33976

City/State and Zip code

AGKTRANSPORTCORP@GMAIL.COM

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

For further information concerning this matter, please call:

JAVIER CARBALLO

786

15-8283

444

1

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32344

Enclosed is a check for the following amount.

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

4 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:

1. AGK TRANSPORT CORP
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

2. AGK FLORIDA TRANSPORT CORP
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

3. WYOMING 4. 87-1222188
(State or country under the law of which it is incorporated) (FEL number, if applicable)

5. MAY 27, 2021 6. _____
(Date of incorporation) (Date of duration, if other than perpetual)

7. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

8. 144 SOUTH CENTER ST., CASPER, WY, 82601
(Principal office street address)

(Current mailing address, if different)

9. Name and street address of Florida registered agent. (P.O. Box NOT acceptable)

Name: SHIRLEY F RODRIGUEZ
Office Address: 1605 CONNIE AVENUE
LEE HIGG ACRES, Florida 33976
(City) (Zip code)

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CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA

9 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.

Shirley F Rodriguez

(Registered agent's signature)

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

11. DIRECTORS

☐ Chairman Name: SHIRLEY E. RODRIGUEZ
☐ Vice Chairman Address: 1605 CONNIE AVE S
☐ Director LEHIGH ACRES, FL 33976
☒ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. _____
Shirley E. Rodriguez
 Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) attests that the facts stated herein are true, and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in § 817.155, F.S.

13. Shirley E Rodriguez
 (Typed or printed name and capacity of person signing application)

STATE OF WYOMING
Office of the Secretary of State

I, CHUCK GRAY, Secretary of State of the State of Wyoming, do hereby certify that according to the records of this office,

AGK Transport Corp.

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on **May 27, 2021**, comply with all applicable requirements of this office. This entity has been assigned entity identification number **2021-001008350**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 7th day of February, 2023 at 7:49 AM. This certificate is assigned ID Number 058323831.





Secretary of State