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SECRETARY OF STATE SUISION OF CORPOSATION OF CORPOSATION

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TRANSMITTAL LETTER

SUBJECT: Ty R ASSOCIATES TRUCKING. CORP.

(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

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

\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
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FROM:	RAMON MOREL	10 Cruz.	
		E C/UB AVE	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: Ty R AssociAtES TRUCKING Corp. 563 horse club AVE. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: CLEWISTON, FL 33440. ARTICLE III TRUCKING, TRANSPORT. The purpose for which the corporation is organized is: ARTICLE IV The number of shares of stock is: 100 P. RAMON HORENO GRUZ INITIAL OFFICERS AND/OR DIRECTORS . List name(s), address(es) and specific title(s): 563 horse club AUE. CLEWISTON, FL 33440. REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: RAMON MORENO CRUZ. 563 horse club AUE. CLEWISTON, FL 33440. ARTICLE VII INCORPORATOR The name and address of the Incorporator is: 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

ARTICLES OF INCORPORATION

Signature/Incorporator