

PO6000102474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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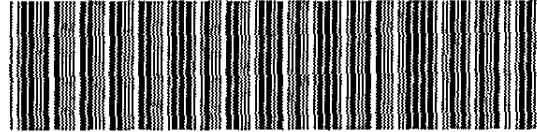
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C.S. 8-7

TRANSMITTAL LETTER

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

SUBJECT: RODOLFO, TRUCKING & HAULING INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

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

ADDITIONAL COPY REQUIRED

FROM: RODOLFO GONZALEZ
 Name (Printed or typed)

3802 SPENSE AVE
 Address

TAMPA, FL. 33614
 City, State & Zip

813) 298-3574
 Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

RODOLFO, S TRUCKING & HAULING INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3802 SPENSE AVE
TAMPA. FL. 33614

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY BUSINESS OR ACTIVITY PERMITTED
UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100
ONE HUNDRED

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

RODOLFO GONZALEZ -PRESIDENT
3802 SPENSE AVE
TAMPA. FL. 33614

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

RALPH PEREZ
10921 AIRVIEW DR
TAMPA. FL. 33625

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RODOLFO GONZALEZ
3802 SPENSE AVE
TAMPA. FL. 33614

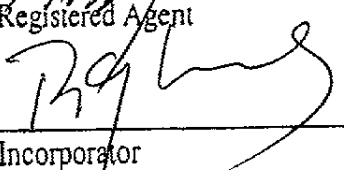
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

8/2/2006

Date



Signature/Incorporator

8/2/2006

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA