

P07000057 258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600082826046

01/02/07--01021--025 **87.50

FILED
07 MAY -9 PM 4: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA

COVER LETTER

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

SUBJECT: Triana Deliveries, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$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

ADDITIONAL COPY REQUIRED

FROM: Pedro Triana
Name (Printed or typed)

626 West 64 Drive Hialeah
Address

33012
City, State & Zip

954-263-4963
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 12, 2007

PEDRO TRIANA
626 WEST 64 DRIVE
HIALEAH, FL 33012

SUBJECT: TRIANA DELIVERIES, INC.
Ref. Number: W07000000115

We have received your document for TRIANA DELIVERIES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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

If you have any questions concerning the filing of your document, please call 850-245-6052.

Paisley A Alford
New Filing Section
Division of Corporations

Letter Number: 107A00000143

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:

Triana Deliveries, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

626 West 64 Drive Hialeah
FL 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Delivery and distribution services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Pedro Triana
626 West 64 Drive Hialeah
FL 33012

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

626 West 64 Drive Hialeah
FL 33012

PEDRO TRIANA
626 WEST 64 DRIVE
HIALEAH FL 33012

5/2/07

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Pedro Triana
626 West 64 Drive Hialeah
FL 33012

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

Signature/Incorporator

Date

Date

FILED
07 MAY -9 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA