

PO7000072793

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

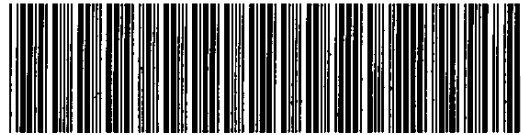
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 JUN 21 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

B. McKnight JUN 22 2007

COVER LETTER

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

SUBJECT: Hell spawn Transport Corp.
(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: USA Insurance Agency Corp.
Name (Printed or typed)

9657 NW South River Drive Suite 4
Address

Hedley FL 33106
City, State & Zip

(305) 887-3321
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:

Hell spawn Transport Corp

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

16931 89TH PLW Loxahatchee FL 33470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any AND ALL LAWFULL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Alexis Milan - President

BALBINO MILAN - Vicepresident

ARTICLE VI REGISTERED AGENT

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

Alexis MILAN

16931 89TH PLW LOXAHatchee FL 33470

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gnetell GONZALEZ / USA INSURANCE Agency Corp.
9657 NW SOUTH RIVER Drive SUITE 4 Medley
FL 33146

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

Alexis Milan

Signature/Registered Agent

Signature/Incorporator

6/15/07

Date

6/15/07

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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