## 19 P) 0 000 128 5 P. 00 Page 1 of 1

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000030093 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE

Account Number: I20000000146

Phone

: (305)444-4994

Fax Number

: (305)444-4977

\*\*Enter the email address for this business entity to be used for Fut annual report mailings. Enter only one email address please.\*\*

1 T				
<u>Kmail</u>	Address:	 	 	

## FLORIDA PROFIT/NON PROFIT CORPORATION PUPO TRANSPORT CORP.

0
1
02
\$78.75

Electronic Filing Menu

Corporate Filing Menu Controls

ARTICLES OF INCORP In compliance with Chapte		ter 621, F.S. (Pro	ofit)		:
ARTICLEI	NAME	•			
The name of the corporation	on shall be:				285 F
•			- τ		
PUPO TRANSPORT COR	P.	, ,	<u>Alama</u> n and Alaman Alaman	A STATE OF THE STA	
	N. T. T. C.				1987 O
ARTICLE II The principal street addres	PRINCIPAL		:		#4 5 r
The principal street address	s and maning acor	ess, ii different	us:		
100 NE 203 TER - APT 1	1 – NORTH MIAN	/I BEACH, FL	33179		
ARTICLE III	PURPOSE				38
The purpose for which the		mized is:		•	- CO
ANY AND ALL LAWFUI	,				
A Years City for Tity	SHARES		•		
ARTICLE IV The number of shares of ste					
And Hallings of Shares of Sh					
SHARES: 1000					
ARTICLE V	INITIAL O	FFICERS AND	OR DIRECT	ORS	
List names(s), address(cs)	and specific title(s	):		**	
1700 W 75 <sup>TH</sup> ST – HIALE		2020 A \$150 hours			
ARTICLE VI The name and Florida str	REGISTER		table) afthe m	nistanad assum is.	
the mame and Florida str	eet aum ess (F.O.	DOX NOT Scool	more) or me re	gistered agent is.	
ISEL ORLANDO PUPO 1700 W 75 <sup>TH</sup> ST - HIALE	AH FL 33014	,			
ARTICLE VII	INCORPO	RATOR			
The name and address of					
			,		
ISEL ORLANDO PUPO					
1700 W 75 <sup>TH</sup> ST - HIALE.	AH FL 33014				
**************************************	**************************************	************** accept service o vith and accept t	f process for the	*************** te above stated con t as registered age	**************************************
o la/	)	· ·		10/10	
Signature/Register	red Agent	<u> </u>		Date	•
Old			2/	10/10 -	****
Signature/Incorr	orator	- ( )		Date	