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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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21-3-01  
Don

**COVER LETTER**

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

SUBJECT: L.E.M. Trucking Incorporated  
(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: Edgar Martinez  
Name (Printed or typed)

23064 SW 107 PL  
Address

CutlerBay, FL 33170  
City, State & Zip

305)986-4712 786) 715-0033  
Daytime Telephone number

martinezjamilet@yahoo.com  
E-mail address: (to be used for future annual report notification)

**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**

L.E.M Trucking Incorporated

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

23064 sw 107 pl  
CutlerBay Fl 33170

Mailing address, if different is:

23064 sw 107 pl  
CutlerBay Fl 33170

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Moving and relocation Services

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Edgar Martinez President  
Address: 23064 sw 107 pl  
CutlerBay Fl 33170

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Edgar Martinez  
Address: 23064 sw 107 pl  
CutlerBay Fl 33170

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Edgar Martinez (president)  
Address: 23064 sw 107 pl  
CutlerBay Fl 33170

*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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

30 SEPT. 2010  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
\_\_\_\_\_  
Required Signature/Incorporator

30 SEPT. 2010  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA