P1/000993/035

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL .		
(Bu	isiness Entity Nar	ne)		
(50	onioso Entity Har	,		
(Do	cument Number)	·		
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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STATE TARY OF STATE

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COVER LETTER

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

SUBJECT: J. Flores Trucking, Inc.			,
(PROPOSED CORPO	RATE NAME - MUST INCL	UDE SUFFIX)	
Enclosed are an original and one (1) copy of the arti	icles of incorporation an	id a check for:	
and an ong har and one (1) dop) or the art			1
\$70.00 \$78.75	\$78.75	× \$87.50	
Filing Fee Filing Fee	Filing Fee	Filing Fee,	1
& Certificate of Status	& Certified Copy	Certified Copy	
		& Certificate of	
		Status	
	ADDITIONAL CO	PY REQUIRED	
			J
FROM: Javier Flores	•		
	Printed or typed)		
1739 Star Avenue			
	Address		
Wauchula, FL 33873-6716			
City	City, State & Zip		

(863) 767-1936 or (863) 781-2586			
Daytime I	elephone number	770	
	•	3	100 to 10
	e.Com		<u> </u>
E-mail address: (to be used	for future annual report notif	ication)	*

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)

FILE SCLNETARY OF STATE SVISION OF CORPURADE

	·	•	A PIDIUM UP CORPORALL
ARTICLE I NAME The name of the corpo	ration shall be: J. Flores Trucking, Inc.		2011 OCT 21 PM 2: 05
ARTICLE II PRINCII	PAL OFFICE		
1739 Star	Principal street address	*******	Mailing address, if different is:
Wauchula	FL 33873-6716		
	ISE the corporation is organized is: the trucking services and to do anything else	consistent with the	Florida Corporations Act.
ARTICLE IV SHARE The number of shares of ARTICLE V INITIAL			
Name and Title:	Javier Flores, President		Maria T. Flores, Secretary
Address:	1739 Star Avenue	_ Address:	1739 Star Avenue
	Wauchula, FL 33873-6716	-	Wauchula, FL 33873-6716
Name and Title: Address:		A alabaa a a .	
Name and Title: Address:		_ Name and Title: _ Address: _	
ARTICLE VI REGIST	TEREN AGENT	-	
	street address (P.O. Box NOT acceptable)) of the registered a	gent is:
Name:	Javier Flores	_	
Address:	1739 Star Avenue		
	Wauchula, FL 33873-6716	_	
ARTICLE VII INCOR	<u>PORATOR</u>		
The name and address			
Name:	Javier Flores	_	
Address:	1739 Star Avenue		
	Wauchula, FL 33873-6716	_	
	s registered agent to accept service of pro familiar with and accept the appointment		re stated corporation at the place designated ent and agree to act in this capacity
* JAUIE	1. FLONES		! 0 /4/2011
	Required Signature/Registered Agent	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Date
	t and affirm that the facts stated herein a rtment of State constitutes a third degree		o that the false information submitted in a and for in s.817.155, F.S.

Required Signature/Incorporator

/#/4/2011

Date