P 3000090808

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MA	L		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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COVER LETTER

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

SUBJECT: Amazan T (PROPOSED CORPORA	ruck Ser	vices Inc		
(PROPOSED CORPORATE NAMÉ – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and one (1) copy of the arti	icles of incorporation and	a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL CO	· · · · · · · · · · · · · · · · · · ·		
FROM: <u>Guadalupe Amazan</u> Name (Printed or typed) 223 Neva Drive				
Address				
West Palm Beach Florida 33415 City, State & Zip				
561 - 345 - S321 Daytime Telephone number				
E-mail address: (to be used for future annual report notification)				

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corpora	ation shall be: Almazan T	ruck Services	Inc	
ARTICLE II PRI	NCIPAL OFFICE Principal street address	Mailing addre	Mailing address, if different is:	
223 Ne	va Drive	**************************************		
West Palm	Beach , A 33415			
ARTICLE III PUR The purpose for which	the corporation is organized is:	acking of Aggr	re gate	
			SECRETARY OF STADIVISION OF CORPORA	
The number of shares of	TIAL OFFICERS AND/OR DIRECTO	esident	24 ∐ONS	
	e: buddlife ttmazan,	Name and Title:		
Address	223 Neva Drive Westfalm Beach Florida 33415	Address:		
Name and Title	•	Name and Title:		
Address		Address:		
Name and Title	·	Name and Title:	 	
Address		Address:	 	
		<u> </u>		

	O O O O O	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS		
Name and Titl	e: Guadalupe Amazan, Trasile Name and Title:	13 NOV -5 PM 12: 54		
Address	203 Neva Drive Address:	10 1101 -5 PA 12: 54		
	West Palm Beach			
	Florida 33415			
The name and Florida	GISTERED AGENT street address (P.O. Box NOT acceptable) of the registered agen	t is:		
	rada lupo Almazan			
	223 Neva Drive			
7	Jest Palm Beach, F1 33415			
ARTICLE VII IN	CORPORATOR			
The name and address	of the Incorporator is:	•		
Name:	Suadalupe Almazan			
Address:	223 Neva Drive			
	West-Palm Beach F1 33415			
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				
_ Suada	Required Signature Registered Agent	10/25/13 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.				
Landal	Required Signature/Incorporator	10 /25/13 Date		