

P/300091179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

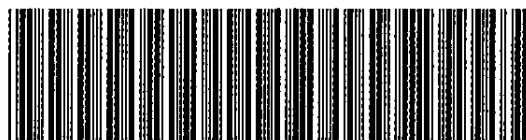
(Document Number)

Certified Copies

Certificates of Status

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11/06/13--01011--001 **78.75

SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 NOV -6 PM 12:59

[Handwritten signature]

COVER LETTER

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

SUBJECT: American Roads 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: Maria C. Trujillo

Name (Printed or typed)

6515 SW 133 Ct.

Address

Miami, Fl. 33183

City, State & Zip

305-970-5939

Daytime Telephone number

Ceci0321@aol.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)

SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 NOV -6 PM 12:59

ARTICLE I NAME

The name of the corporation shall be: American Roads Transport Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6515 SW 133Th. Court

Miami Fl. 33183

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all lawful business activities

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria C. trujillo

Name and Title: President

Address 6515 SW 133TH. Ct
Miami Fl. 33183

Address: _____

Name and Title: Olga Uribe

Name and Title: Secretary

Address 12300 SW 104th. Terrace
Miami, Fl. 33186.

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(conti.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Iosvany Martos

Address: 6515 SW 133 CT

Miami, Fl. 33183

ARTICLE VII INCORPORATOR

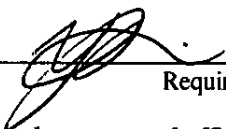
The name and address of the Incorporator is:

Name: Maria C Trujillo

Address: 6515 SW 133 CT

Miami, fl 33183

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

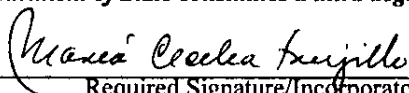


Required Signature/Registered Agent

11/04/2013

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

11/04/13

Date