

PA00046659

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

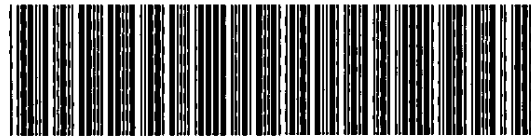
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/05/14--01015--012 **43.75

05/27/14--01049--008 **26.25

FILED
14 MAY 27 PM 2:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

W14-14906

COVER LETTER

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

SUBJECT: **COLCARGA ENVIOS 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: **EDWIN ABUSHIHAB**

Name (Printed or typed)

1289 MAJESTY TERR

Address

WESTON FL 33327

City, State & Zip

305 394 4870

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.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

14 MAY -9 PM 3:56

DEPT. OF STATE
TALLAHASSEE, FLORIDA

March 7, 2014

EDWIN ABUSHIHAB
1289 MAJESTY TER
WESTON, FL 33327

SUBJECT: COLCARGA ENVIOS CORP
Ref. Number: W14000014906

We have received your document for COLCARGA ENVIOS CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We have received your document for COLCARGA ENVIOS CORP and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$26.25.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

COVER LETTER

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

SUBJECT: COLCARGA ENVIOS 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: EDWIN ABUSHIHAB

Name (Printed or typed)

1289 MAJESTY TERR

Address

WESTON , FL 33327

City, State & Zip

305 394 4870

Daytime Telephone number

INFO@COLCARGAENVIOS.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

The name of the corporation shall be:

COLCARGA ENVIOS CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3028 NW 72 AVE STE.6

MIAMI FL 33122

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SHIPMENT

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **EDWIN ABUSHIHAB / PRESIDENT**

Name and Title: **IVONNE RENTERIA/ VICEPRESIDENT**

Address: **1289 MAJESTY TERR
WESTON FL 33327**

Address: **1289 MAJESTY TERR
WESTON FL33127**

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

14 MAY 27 PM 2:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(cont.)

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: EDWIN ABUSHIHAB

Address: 1289 MAJESTY TERR

WESTON FL 33327

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Name: EDWIN ABUSHIHAB

Address: 1289 MAJESTY TERR

WESTON FL33327

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

03/21/2014

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

03/21/2014

Date

03/21/2014
MAY 27 PM 2:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA