

PS000005828

(Requestor's Name)

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(City/State/Zip/Phone #)

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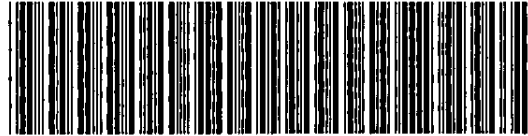
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
15 JAN 20 PM 10:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: CYA TRUCKING, INC.

(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: CHRISTINA HIDALGO

Name (Printed or typed)

9004 SW 215TH ST

Address

CUTLER BAY, FL 33189

City, State & Zip

786.501.4745

Daytime Telephone number

CYATRUCKING@GMAIL.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:

CYA TRUCKING, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9004 SW 215TH ST

CUTLER BAY, FL 33189

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct transportation business as a small company.

Transporting all types of goods all over the United States.

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TALLAHASSEE FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: **1**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **CHRISTINA HIDALGO, PRESIDENT**

Name and Title: _____

Address

9004 SW 215TH ST

Address: _____

CUTLER BAY, FL 33189

Name and Title: _____

Name and Title: _____

Address

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: CHRISTINA HIDALGO

Address: 9004 SW 215TH ST

CUTLER BAY FL 33189

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TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CHRISTINA HIDALGO

Address: 9004 SW 215TH ST

CUTLER BAY, FL 33189

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

Chidalgo

Required Signature/Registered Agent

1/15/15

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.

Chidalgo

Required Signature/Incorporator

1/15/15

Date