

(Requestor's Name)						
(Address)						
(Address)						
(Ci	ty/State/Zip/Phone #	f)				
PICK-UP	WAIT	MAIL				
(Bu	usiness Entity Name)				
(Do	ocument Number)					
Certified Copies	Certificates o	of Status				
Special Instructions to Filing Officer:						
		:				

Office Use Only



900285516709

06/09/16--01018--001 **70.00





FLORIDA DEPARTMENT OF STATE Division of Corporations

June 15, 2016

MARTIN RACIEL SANCHEZ ROCHE 5386 GUILDCREST ST. LAKE WORTH, FL 33463

SUBJECT: S & L TRUCKING CORPORATION

Ref. Number: W16000043229

We have received your document for S & L TRUCKING CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 216A00012561

Jessica A Fason Regulatory Specialist II

www.sunbiz.org

COVER LETTER

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

SUBJECT: Schez I	Roche Trucking Corp.		
Soboler.	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL COPY REQUIRED	
	·		
m M	artin R. Sanchez Roche		
FROM:		e (Printed or typed)	
53	86 Guilderest St.		
		Address	
La	ke Worth, FL 33463		
	City	, State & Zip	
56	1-293-9967		
	Daytime 7	Celephone number	
ma	rtinsanchezroche@gmail.com		
	F-mail address: (to be use	d 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)

CLE II PRI	INCIPAL OFFICE Principal <u>street</u> address	Mailing a	ddress, if different is:	
5 Guildcrest St, 2 Worth, FL 33463		5386 Guildcrest St. Lake Worth, FL 33463		
ment owned ar	nd used by me or future employees Also	To expand my current status as a	trucking company.	
	•			
CLE IV SHA	<u>ARES</u> 1 Share			
ımber of shares	ARES 1 Share of stock is: ITAL OFFICERS AND/OR DIRECTORS			
umber of shares	ARES 1 Share of stock is: ITAL OFFICERS AND/OR DIRECTORS			
imber of shares CLE V INIT Name and T	ARES 1 Share of stock is: TIAL OFFICERS AND/OR DIRECTORS itle: Martin R. Sanchez Roche	Name and Title:	16	
imber of shares CLE V INIT Name and T	of stock is: I Share of stock is: ITAL OFFICERS AND/OR DIRECTORS itle: Martin R. Sanchez Roche 5386 Guildcrest St. Lake Worth, FL 33463 tle: Yaima Leyva Santos, Secretary	Name and Title:		
omber of shares CLE V INT Name and T Address	of stock is: I Share of stock is: ITAL OFFICERS AND/OR DIRECTORS Title: Martin R. Sanchez Roche 5386 Guildcrest St. Lake Worth, FL 33463 tle: Yaima Leyva Santos, Secretary 5386 Guildcrest St.	Name and Title: Address: Name and Title:	16 AUG 11 P)	
Name and Ti	of stock is: I Share of stock is: IIAL OFFICERS AND/OR DIRECTORS itle: Martin R. Sanchez Roche 5386 Guildcrest St. Lake Worth, FL 33463 tle: Yaima Leyva Santos, Secretary 5386 Guildcrest St.	Name and Title:Address:Name and Title:Address:		
Name and Ti	ARES of stock is: ITAL OFFICERS AND/OR DIRECTORS Title: Martin R. Sanchez Roche 5386 Guildcrest St. Lake Worth, FL 33463 tle: Yaima Leyva Santos, Secretary 5386 Guildcrest St. Lake Worth, FL 33463	Name and Title: Address: Name and Title: Address:	16 AUG 17 PP 5000	

Name a	and Title:	Name and Title:	
Addre	ss	Address:	
	REGISTERED AGENT		
	Florida street address (P.O. Box NOT acceptal Martin R. Sanchez Roche	ole) of the registered agent is:	
Name:			
Address:	5386 Guildcrest St.		
	Lake Worth, FL 33463	<u>_</u>	
ARTICLE VII	INCORPORATOR		
The name and a	address of the Incorporator is:		
Name:	Martin R. Sanchez Roche		
Address:	5386 Guildcrest St.		
	Lake Worth, FL 33463		
ARTICLE VIII Effective date, i (If an effective days after the f	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and ciling.)	. (OPTION annot be more than five bus	AL) siness days prior or 90 business
	e inserted in this block does not meet the applic effective date on the Department of State's reco		ents, this date will not be listed as
Having been na this certificate, I	med as registered agent to accept service of pr an familiar lifth and accept the appointment t	ocess for the above stated con is registered agent and agree	poration at the place designated in to act in this capacity
	X		18 July 2016.
	Required Signature/Registered Agent		Date
I submit this do document to the	cument and affirm that the facts stated herein Department of State constitutes a third degree	are true. I am aware that the felony as provided for in s.81	ne false information submitted in a 7.155, F.S.
	~ (\ \ \ \ /		18 July 2016
Requ	ired Signal No Incorporator		Date