

# Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : CORP USA  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

16 DEC -2 AM 10:50

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

## FLORIDA PROFIT/NON PROFIT CORPORATION SORED TRANSPORTATION, CORP.

Certificate of Status	0
Certified Copy	1
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DEC 06 2016

T. SCOTT

Electronic Filing Menu

Corporate Filing Menu

Help

*Please file this on the effective date 11/1/17*

*12/1/16*



December 5, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CORP USA

SUBJECT: SORED TRANSPORTATION, CORP  
REF: W16000081146

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

FAX Aud. #: H16000295972  
Letter Number: 316A00025780

P.O BOX 6327 ~ Tallahassee, Florida 32314

416000295972

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: SORED TRANSPORTATIONS, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address  
252 E 54TH ST  
MIAMI BEACH, FL 33013

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES  
The number of shares of stock is: 1000 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROJANDO CARRILLO (P)

Address: 252 E 54TH ST  
MIAMI BEACH, FL 33013

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

16 DEC -2 AM 11:50  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

**ARTICLE VIII:**

THIS COMPANY SURE BE FORM AND FILE WITH IN A STARING BUSINESS DAY JANUARY 1, 2017

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: ROI-ANDO CARRILLO

Address: 252 E 54TH ST

HIALEAH, FL 33013

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ROI-ANDO CARRILLO

Address: 252 E 54TH ST

HIALEAH, FL 33013

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 01-01-2017, (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

[Signature]  
Required Signature/Registered Agent

11/24/2016  
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.

[Signature]  
Required Signature/Incorporator

11/24/2016  
Date