

P17 000 022 729

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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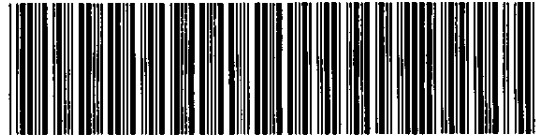
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/14/17--01007--003 **78.75

D O'KEEFE
MAR 14 2017

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 MAR 16 PM 12:18

W17-21534



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 14, 2017

PORFIRIO LOPEZ JR.
2340 NEWMARK DR.
DELTONA, FL 32738

SUBJECT: LOPEZ & SONS TRUCKING INC.
Ref. Number: W17000021534

We have received your document for LOPEZ & SONS TRUCKING INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is .

P16000043860 ACT LOPEZ & SON TRUCKING CORP.

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.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 017A00004847

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DIVISION OF CORPORATIONS
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COVER LETTER

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

SUBJECT: P. Lopez & Sons 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: Porfirio Lopez Jr.
Name (Printed or typed)

2340 Newmark Dr.
Address

Deltona, FL 32738.
City, State & Zip

386-956-2959.
Daytime Telephone number

Porfirio Lopez Jr@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: P. Lopez & Sons Trucking Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2340 Newmark Dr.

Deltona, FL 32738

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Porfirio Lopez Jr.

Name and Title: President

Address: 2340 Newmark Dr.

Address:

Deltona, FL 32738

Name and Title: Evelyn Lopez

Name and Title: Evelyn Lopez / Vice President

Address: 2340 Newmark Dr.

Address:

Deltona, FL 32738

Name and Title:

Name and Title:

Address:

Address:

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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: PORFIRIO LOPEZ JR.
Address: 2340 NEWMARK DR.
DELTONA, FL.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: PORFIRIO LOPEZ JR.
Address: 2340 NEWMARK DR.
DELTONA, FL 32738

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

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

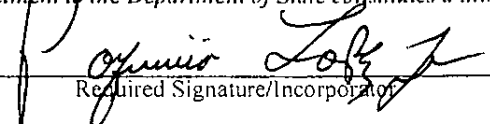
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature/Registered Agent

3-14-17.
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

3-14-17.
Date