

03/22/2017 15:25

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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 : LAZARIUS CORPORATE FILING SERVICE, INC.  
Account Number : I28000000019  
Phone : (305)552-5973  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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

**FLORIDA PROFIT/NON PROFIT CORPORATION  
K&M SOLER TRANSPORT INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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3/23/17

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 (Profit)

H17000079439

**ARTICLE I NAME:** The name of the corporation is:

K & M Soler transport Inc.

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

11805 SW 183rd St, Miami FL 33177

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Lizandra Fernandez Moro (P)  
Vice-President Magdiel Soler Fernandez

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Lizandra Fernandez Moro  
11805 SW 183rd St, Miami FL 33177

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

Lizandra Fernandez Moro  
11805 SW 183rd St  
Miami FL 33177

STATE OF FLORIDA  
TALLAHASSEE

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Mar. 21. 2017 3:08PM

LAZARUS

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No. 9230 P. 3/7

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**Required Signatures:**

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

  
\_\_\_\_\_  
Registered Agent

03/21/2017  
\_\_\_\_\_  
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.

  
\_\_\_\_\_  
Incorporator

03/21/2017  
\_\_\_\_\_  
Date

17 MAR 22 AM 10:54  
DEPT OF STATE  
TALLAHASSEE FLORIDA

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