

P17 0000 88919

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000290406 3)))



H170002904063ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : PADRO AND COMPANY, P.A.
Account Number : I20050000094
Phone : (305) 500-9361
Fax Number : (305) 500-9492

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

Email Address: Tiffany Guaty @ gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION

JT Guaty Transport Corp

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

17 NOV -3 AM 10:47

BUREAU OF CORPORATE
INFORMATION SERVICES

N. SAMS
NOV 06 2017

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME JT Guaty Transport Corp
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address _____

Mailing address, if different is: _____

90 SW 3rd ST , # 2311

Miami, FL 33130

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

Lawful Business Activities

ARTICLE IV SHARES

The number of shares of stock is: 2,500 shares @ 0.01 cent

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tiffany Guaty PSDT

Name and Title: _____

Address 90 SW 3rd ST
Miami, FL 33130

Address: _____

Name and Title: Julio Guaty PSDT

Name and Title: _____

Address 90 SW 3rd ST
Miami, FL 33130

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

RECEIVED
17 NOV -3 PM 4:11

CD

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: Tiffany Guaty
Address: 90 SW 3rd ST , #2311
Miami, FL 33130

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tiffany Guaty
Address: 90 SW 3rd ST, # 2311

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 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

Required Signature/Registered Agent

11/2/17
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

11/2/17
Date