Division of Corporations
Electronic Filing Cover Sheet

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To:			
	Division of Co	rporations	
	Fax Number	: (850)617-6381	711
			-11
from:			LONG.
	Account Name	: EXPRESS CORPORATE FILING SERVICE INC.	<u> </u>
	Account Number	: 120000000146	₽
	Phone	: (305)444-4994	>.
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FLORIDA PROFIT/NON PROFIT CORPORATION PATALLO TRUCKING INC

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 \$78.75

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MAY 02 2018

Electronic Filing Menu

Corporate Filing Menu

Help

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

ARTICLE I NAME The name of the corporat	tion shall be: Patal	10 truck	ing =	tnc.	·	·	
ARTICLE II PRINC				ng address. If d	if lere nt is:		
10974 SU HIRMIFC) 251 APH: . 33174	108.			·	<u>ــــــــــــــــــــــــــــــــــــ</u>	
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			-		<u>等。</u> 公:	-	
				·	<u>v.</u>	Hd	_ <u></u> ;" f ·
ARTICLE IV SHAR	ES /00				ALONS:	<u></u>	- 12
Name and Title	U OFFICERS ANDVOR DU GE. YOU'D PE 10874 SW 2N Wami FL 33	stallo_Num		Zesic	lent		
Name and Title	;	Nan					
Address		Ada					
							_
Name and Title	a	Nar	no and Title:				 ·
Address		Add	iress:				
							_

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Frontine street address (P.O. Box NOT acceptable) o	f the registered agent is:
Name: Gerardo Palallo	- 18
Address: 10874 SW 25+ APT 1	28
Miami PL 33174	OR - YAY - I PA
ARTICLE VII INCORPORATOR	
The mame and address of the Incorporator is:	
Mana Gorardo Yatallo	
Name: Gorardo Patallo Address: 10874 SW 2nd St.	APT 108
Hiami, FL 33174	
ARTICLE YUI EFFECTIVE DATE:	(COTTIONAL)
Effective date, if other than the thate of filing: (If an effective date is listed, the date must be specific and cann filing.)	of be more than five days prior or 90 days after the
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	e standary filing requirements, this date will not be fisted as
Having been named as registered agent to accept service of proce- this certificate, I am familiar with and accept the appointment as re-	ss for the above stated corporation at the place designated in restreed opens and agree to act in this capacity
	C =1 2 -10
Required Signature/Registered Agent	DAR.
I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third dayree fett	e true. I am aware that the false information submitted in a my as provided for in x.817.155, F.S.
	5-01-2018 Date
Required Signature/Incorporator	Dato