Division of Corporations

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(((H19000123286 3)))



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To:

Division of Corporations

Fax Number : (850)517-6381

From:

Account Name : THREE K FAST CARRIER SERVICES INC

Account Number : I20180000033 Phone : (305)805-3516 Fax Number : (305)887-5844

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 LORENZO R TRANSPORT INC

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|-----------------------|---------|
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COVER LETTER

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

| SUBJECT: LOREN | ZO R TRANSPORT INC | | |
|----------------------|---|--|-------------------------|
| | (PROPOSED CORPOR | ATE NAME - MUST INCL | UDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the ar | ticles of incorporation and | d a check for: |
| S70.00 Filing Fee | S78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | & Certificate of Status |
| FROM: ORL | LOST NOME. | | |
| | Namo | (Printed or typed) | |
| 1937 | ABBEY RD APT 302 | | |
| | P | Address | |
| WES | T PALM BEACH, FL 33415 | | |
| | City, | State & Zip | |
| 561-8 | 56-6981 | | |
| _ | Daytime Te | elephone number | |
| ORLA | NDORIVERO05@HOTMAIL.CO |)M | |
| | É-ma:l address: (to be used | for future annual report no | otification) |

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)

| | | | |
|--|--|-----------------------------------|---------------------------|
| TICLE II PA 37 ABBEY RD | UNCIPAL OFFICE Principal <u>street</u> address APT 302 | Mailing 1937 ABBEY RD | address, if different is: |
| /EST PALM BEACH, FL 33415 | | WEST PALM BEACH, FL 33415 | |
| · · · · · · · · · · · · · · · · · · · | | | |
| TICLE III PU | RPOSE ich the corporation is organized is: | | |
| IY AND ALL L | AWFUL BUSINESS | | |
| | | | <u></u> |
| | | | |
| | | | |
| | | | |
| | | | |
| TICLE IV SH. | 4RES | | 19 APR |
| · ···································· | of Stock 15. | | R 15 |
| TICLE V INI | TIAL OFFICERS AND/OR DIRECTORS | | |
| Name and T | _{istor} ORLANDO F. RIVERO QUINTERO | PDES | |
| | ruc | Name and Title: | |
| Address | 1937 ABBEY RD APT 302 | Name and Title: Address: | —— |
| Address | 1937 ABBEY RD APT 302 | | LORIDA |
| Address | 1937 ABBEY RD APT 302 | | —— |
| | WEST PALM BEACH, FL 33415 | Address: | STATE OF |
| Name and Ti | WEST PALM BEACH, FL 33415 | Address: Name and Title: | STATE OF |
| | WEST PALM BEACH, FL 33415 | Address: Name and Title: | STATE OF |
| Name and Ti | WEST PALM BEACH, FL 33415 | Address: Name and Title: | STATE OF |
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| Name and Tit | WEST PALM BEACH, FL 33415 | Name and Title: Name and Title: | STATE OF |

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| Name | and Title: | Name and Title: |
|--------------------|--|--|
| Addre | | |
| | | |
| | | |
| ARTICLE VI | REGISTERED AGENT | |
| | Florida street address (P.O. Box NOT acceptable | of the registered again is: |
| Name: | ORLANDO F. RIVERO QUINTERO | you me regimered agent is. |
| Address: | 1937 ABBEY RD APT 302 | |
| | WEST PALM BEACH, FL 33415 | |
| ARTICLE VII | INCORPORATOR | |
| | address of the Incorporator is: | |
| Name: | ORLANDO F. RIVERO QUINTERO | |
| Address: | 1937 ABBEY RD APT 302 | • |
| | WEST PALM BEACH, FL 33415 | _ |
| Effective date, if | other than the date of filing: 4-15-2019 Inte is listed, the date must be specific and com- | (OPTIONAL) lot be more than five days prior or 90 days after the |
| Note: If the date | | S. C. |
| (1,1) | | is for the above stated corporation at the place designated in gistered agent and agree to act in this capacity |
| X)K | il be | 4-15-2019 |
| # . # . t. a. | Required Signature/Registered Agent | Date |
| submit this doci | ument and affirm that the facts stated herein are Department of State constitutes a third degree felo | true. I am aware that the false information submitted in a my as provided for in s.817.155, F.S. |
| VIVZ | tole | 4-15-2019 |
| · Kequii | ed Signature/Incorporator | Date |