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Division of Corporations

Fax Number

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From:

Account Name : THREE K FAST CARRIER SERVICES INC.

Account Number : I20180000033

: (305)805-3516

Phone Fax Number

: (305)887-5844

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

## FLORIDA PROFIT/NON PROFIT CORPORATION LARA R TRUCK INC

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## **COVER LETTER**

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ξ,

UBJECT:	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
inclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l a check for:
S70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRE	
FROM:	NIER LARA LOPEZ	e (Printed or typed)	
25 \	W 30TH ST APT 1		
		Address	
HLA	LEAH, FL 33012		
	City	, State & Zip	
786	-296-7941		
	Daytime	l'elephone number	
REI	NIER2016@YAHOO.COM		
	E-mail address: (to be use	ed 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)

V 30TH ST APT	NCIPAL OFFICE Principal street address	Mailing ad 25 W 30TH ST AP	Mailing address, if different is: 25 W 30TH ST APT 1	
ALEAH, FL 33012		HIALEAH, FL 330	12	
TICLE III PUI purpose for which	RPOSE th the corporation is organized is: WFUL BUSINESS			
	· · · · · · · · · · · · · · · · · · ·			
ICLE IV SH.	4RFS			
number of shares	TIAL OFFICERS AND/OR DIRECTO			
number of shares  TICLE V INI  Name and T	of stock is:  TIAL OFFICERS AND/OR DIRECTO  itle: REINIER LARA LOPEZ, PRES		<u></u>	
TICLE V INI	TIAL OFFICERS AND/OR DIRECTOR  TIAL OFFICERS AND/OR DIRECTOR  TIAL OFFICERS AND/OR DIRECTOR  TIAL OFFICERS AND/OR DIRECTOR  TO STAND OF THE STAND OF	<u>ORS</u>		
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number of shares  FICLE V INI  Name and T	TIAL OFFICERS AND/OR DIRECTOR  TIAL OFFICERS AND/OR DIRECTOR  TIAL OFFICERS AND/OR DIRECTOR  TIAL OFFICERS AND/OR DIRECTOR  TO STAND OF THE STAND OF	ORS Name and Title:	119 July 199	
number of shares  TICLE V INI  Name and T  Address	TIAL OFFICERS AND/OR DIRECTOR  TIAL OFFICERS AND/OR DIRECTOR  TIAL OFFICERS AND/OR DIRECTOR  TIAL OFFICERS AND/OR DIRECTOR  TO STAND OF THE STAND OF	ORS  Name and Title:  Address:	118 (U. 19 AM 10:	
number of shares  TICLE V INI  Name and T  Address	TIAL OFFICERS AND/OR DIRECTOR  Citle: REINIER LARA LOPEZ, PRES  25 W 30TH ST APT 1  HIALEAH, FL 33012	ORS  Name and Title:  Address:	119 JU 19 AM	
Name and Ti	TIAL OFFICERS AND/OR DIRECTOR  Citle: REINIER LARA LOPEZ, PRES  25 W 30TH ST APT 1  HIALEAH, FL 33012	Name and Title: Name and Title:	118 (U. 19 AM 10: 5	
Name and Ti	TIAL OFFICERS AND/OR DIRECTOR  Citle: REINIER LARA LOPEZ, PRES  25 W 30TH ST APT 1  HIALEAH, FL 33012	Name and Title: Name and Title:	118 (U. 19 AM 10: 5	
Name and Ti Address  Name and Ti Address	TIAL OFFICERS AND/OR DIRECTOR  Citle: REINIER LARA LOPEZ, PRES  25 W 30TH ST APT 1  HIALEAH, FL 33012	Name and Title:  Name and Title:  Address:  Address:	118 (U. 19 AM 10: 53	
Name and Ti Address  Name and Ti Address	TIAL OFFICERS AND/OR DIRECTOR Sitle: REINIER LARA LOPEZ, PRES 25 W 30TH ST APT 1 HIALEAH, FL 33012	Name and Title:	118 (U. 19 AM 10: 53	

Name a	ind Title:	Name and Title:	··
Addre	es	Address:	
		<del></del>	
	·		
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	REINIER LARA LOPEZ		
Address:	25 W 30TH ST APT 1	<del></del>	
	HIALEAH, FL 33012	<del></del>	
ARTICLE VII	INCORPORATOR		
The name and	address of the Incorporator is:		
Name:	REINIER LARA LOPEZ	_	
Address:	25 W 30TH ST APT I		
	HIALEAH, FL 33012	<del></del>	
Effective date,	if other than the date of filing: 7-29-2019 date is listed, the date must be specific and can	. (OPTIONAL aut be more than five days p	) rior or 90 days after the
	te inserted in this block does not meet the applicab effective date on the Department of State's records		s, this date will not be listed as
Having been no this certificate,	amed as registered agent to accept service of proce I am familiar with and accept the appointment as r	ess for the above stated corpor registered agent and agree to a	ration at the place designated in act in this capacity
X)			7-29-2019
<del>-4</del>	Required Signature/Registered Agent		Date
	ocument and affirm that the facts stated herein ar		
document to the	e Department of State constitutes a third degree fel	ony as provided for in s.817.1:	55, F.S.
			7-29-2019
Req	uired Signature/Incorporator	<del>-</del>	Date