

Nov 22 19:04:10

11/20/2019

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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : THREE K FAST CARRIER SERVICES INC
Account Number : 120180000033
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: TAVO974@yahoo.com

FLORIDA PROFIT/NON PROFIT CORPORATION
I & Y TRANSPORT INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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NOV 20 2019

Electronic Filing Menu

Corporate Filing Menu

Help

(H190003400853)

COVER LETTER

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

SUBJECT: I & Y TRANSPORT INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
& Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: FIRST NAME: OCTAVIO / LAST NAME: COMPTE ROJAS
Name (Printed or typed)

12771 SW 256TH ST

Address

HOMESTEAD, FL 33032

City, State & Zip

305-726-7565

Daytime Telephone number

TAVO974@YAHOO.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

(H190003400853)

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

ARTICLE I NAMEThe name of the corporation shall be: I & Y TRANSPORT INC**ARTICLE II PRINCIPAL OFFICE**Principal street address12771 SW 256TH STHOMESTEAD, FL 33032

Mailing address, if different is:

12771 SW 256TH STHOMESTEAD, FL 33032**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: OCTAVIO M. COMPTE ROJAS, PRES Name and Title: _____Address 12771 SW 256TH ST Address: _____HOMESTEAD, FL 33032 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

19 NOV 20 PM 2:23

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS

(H190003400853)

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: OCTAVIO M. COMPTE ROJAS
 Address: 12771 SW 256TH ST
HOMESTEAD, FL 33032

ARTICLE VII INCORPORATORThe name and address of the incorporator is:

Name: OCTAVIO M. COMPTE ROJAS
 Address: 12771 SW 256TH ST
HOMESTEAD, FL 33032

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CLERK
SECRETARY OF STATE
DIVISION OF CORPORATION**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: 11-20-19 (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

11-20-19

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

11-20-19

Date