

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

P20000003704

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((H20000023069 3)))



H200000230693ABCW

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To:

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

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:

HugoChaconGonzalez25@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION  
CHACON TRUCKING INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

## COVER LETTER

(H200000230693)

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

SUBJECT:

Chacon Trucking 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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM:

Hugo Chacon Gonzalez

Name (Printed or typed)

10525 SW 32nd ST

Address

Miami, FL 33165

City, State &amp; Zip

(786) 202-8818

Daytime Telephone number

Hugochacongonzalez5@gmail.com

E-mail address: (to be used 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)

(H200000230693)

ARTICLE I NAME

The name of the corporation shall be:

Chacon Trucking Inc.

ARTICLE II PRINCIPAL OFFICEPrincipal street address10525 SW 32nd St  
Miami, FL 33165

Mailing address, if different is:

10525 SW 32nd St  
Miami, FL 33165ARTICLE 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

FILED  
2020 JAN 21 PM 3:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDAARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Hugo Chacon Gonzalez, President

Address

10525 SW 32nd St  
Miami, FL 33165

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(H200000230693)

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: Hugo Chacon Gonzalez  
 Address: 10525 SW 32nd ST  
Miami, FL 33165

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Hugo Chacon Gonzalez  
 Address: 10525 SW 32nd ST  
Miami, FL 33165

**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: 01-21-2022 (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:

(X) [Signature]  
 Required Signature/Registered Agent

01-21-2022  
 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.

(X) [Signature]  
 Required Signature/Incorporator

01-21-2022  
 Date