2/18/2020



Division of Corporations Electronic Filing Cover Sheet

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(((H200000543573)))



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To:

Division of Corporations

: (850)617-6381

From:

Account Name : THREE K FAST CARRIER SERVICES INC

Account Number : I20180000033

Phone Fax Number

: (305)805-3516 : (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 FALCON CONSTRUCTION GROUP CORP

Certificate of Status	0
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Estimated Charge	\$70.00

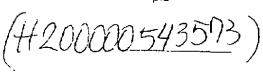
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Electronic Filing Menu

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## COVER LETTER

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

SUBJECT:	FALCON CONSTR	RUCTION GRO	UP CORP								
•	(* XIOI OODD CORTORA	ENAME - MUST INCLE	IDE SUFFIX)								
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:								
✗ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	☐ S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED								
		•									
First Name: LUZ Last Name: LANZA LETROP Name (Printed or typed)  2135 TAYLOR STREET Address											
							HOLLYWOOD, FLORIDA 33020 City, State & Zip				
	Destine Telephone number.										
E-mail address: (to be used for future annual report notification)											
NOTE: Please provide the original and one copy of the articles.											

(H200000543573)

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

ICLEII PR	INCIPAL OFFICE				
	Principal street address	<b>3.4</b> -101			
Taylor ST	street address	Mailing ad 2135 Taylor ST	Mailing address, if different is:		
wood, FL 33020		Hallywood, FL 33020			
ICLE ПІ PUI	<u>RPOSE</u>	second All 1 c mm			
outbose for while	ch the corporation is organized is: An	y and All Lawruli Purpose			
	· · · · · · · · · · · · · · · · · · ·				
•			. ————		
CLE IV SHA	IRES				
umber of shares	of stock is: 100	<u> </u>			
			(3)		
	and the second s				
CLE V INT	TAL OFFICERS AND/OR DIRECTO	PRS	- TO		
	· · ·	<del></del>			
Name and T	ille: Luz A Lanza Letrop, pre	Name and Title:	·		
	ille: Luz A Lanza Letrop, pre	Name and Title:			
Name and T	2135 Taylor ST	Name and Title:	·		
Name and T	ille: Luz A Lanza Letrop, pre	Name and Title:	·		
Name and T	2135 Taylor ST	Name and Title:	·		
Name and T Address	Educ A Lanza Letrop, pre 2135 Taylor ST Hollywood, FL 33020	Address:			
Name and T Address	Educ A Lanza Letrop, pre 2135 Taylor ST Hollywood, FL 33020	Address:			
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Name and Tit Address  Name and Tit Address	Ele: Luz A Lanza Letrop, presente 2135 Taylor ST Hollywood, FL 33020	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	; œ		
Name and T Address Name and Tit Address	Educidate Luz A Lanza Letrop, presentation of the second s	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	; œ		

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Name an	d Title:	Name and Title:			
Address	·	Address:			
			<del></del> .		
ARTICLE VI The name and F	REGISTERED AGENT forida street address (P.O. Box NOT acceptable)	of the registered agent is:			
Name:	Luz A Lanza Letrop	<u> </u>			
Address:	2135 Taylor ST		20		
	Hollywood, FL 33020				
ARTICLE VII	INCORPORATOR				
The name and ad	dress of the Incorporator is:		<del>-</del> `` ယ		
Name:	Luz A Lanza Letrop	<del></del>	=		
Address:	2135 Taylor ST	·			
· · · · · · · · · · · · · · · · · · ·	Hollywood, FL 33020				
Effective date, if a (If an effective diffiling.)  Note: If the date	ether than the date of filing:  ate is listed, the date must be specific and can inserted in this block does not meet the applicable fective date on the Department of State's recording	le statutory filing maniremente, this			
Having been nam certificate, I am fa	ed as registered agent to accept service of process miliar with and accept the appointment as regist	for the above stated corporation at th ered agent and agree to act in this cap	e place designated in this sacity		
<u> </u>	Speller	2	11/2020		
d and a second	Recurred Signature/Registered Agent		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 \$.817.155, F.S.					
) _	- Charles	· · · · · · · · · · · · · · · · · · ·	1112020		
Required Signatur	e/Inoorporager	Date	71,12000		