

2/24/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P20000016683

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

From:
Account Name : THREE K FAST CARRIER SERVICES INC
Account Number : I2018000033
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: KATYDEARMAS@yahoo.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
TONY LEON TRUCK INC**

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

RECEIVED
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STATE OF FLORIDA

(H. 200000614783)

COVER LETTER

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

SUBJECT: TONY LEON TRUCK 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: PEDRO A. LEON
Name (Printed or typed)

19800 SW 180TH AVE #190
Address

MIAMI, FLORIDA 33187
City, State & Zip

786-339-4146
Daytime Telephone number

KATYDEARMAS@YAHOO.COM
E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I NAME

The name of the corporation shall be: TONY LEON TRUCK INC

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

19800 SW 180TH AVE #190

19800 SW 180TH AVE #190

MIAMI, FLORIDA 33187

MIAMI, FLORIDA 33187

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: PEDRO A. LEON, PRES Name and Title: _____

Address: 19800 SW 180TH AVE #190 Address: _____

MIAMI, FLORIDA 33187 _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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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: Pedro A. Leon
Address: 19800 SW 180th Ave #190
Miami, FL 33187

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FALL HASSELL, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Pedro A. Leon
Address: 19800 SW 180th Ave #190
Miami, FL 33187

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 2/24/2020 (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

2/24/2020
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

2/24/2020
Date