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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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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: Bardales6.com@icloud.com

FLORIDA PROFIT/NON PROFIT CORPORATION LOBARCO TRUCKING CORP

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

J. FASON

JUL 27 2020

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COVER LETTER

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

SUBJECT: Lobarco Trucking Corp.
(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: Manuel L. Bardales
Name (Printed or typed)

10497 NW 3rd St
Address

Pembroke Pines, FL 33026
City, State & Zip

954-296-5289

Daytime Telephone number

Bardales6.com@icloud.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)

ARTICLE I NAME

The name of the corporation shall be: LOBARCO TRUCKING CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

10497 NW 3rd St.
Pembroke Pines, FL 33026

Mailing address, if different is:

10497 NW 3rd St
Pembroke Pines, FL
33026

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:

Manuel L. Bardales, president

Address

10497 NW 3rd St
Pembroke Pines,
FL 33026

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

2020 JUL 24 AM 10:19
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CLERK OF DISTRICT COURT
NINTH JUDICIAL CIRCUIT
MIAMI, FLORIDA

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: Manuel L. Bardales
Address: 10497 NW 3rd St
Pembroke Pines, FL 33026

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: Manuel L. Bardales
Address: 10497 NW 3rd St
Pembroke Pines, FL 33026

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 7/24/20 (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

7/24/20
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

7/24/20
Date

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CLERK OF THE STATE
DEPT. OF STATE, F.L.