Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6381

Account Name : THREE K FAST CARRIER SERVICES INC

Account Number : I20180000033

: (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, **

FLORIDA PROFIT/NON PROFIT CORPORATION AMED & LENA TRUCKING INC

AIVILD OF INDIAN INCOME.		
Certificate of Status	0	
Certified Copy	0	
Page Count	04	
Estimated Charge	\$70.00	

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<u>∧115 0 4 2020</u>

Electronic Filing Menu Corporate Filing Menu

Help

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COVER LETTER

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

	A TRUCKING INC				
(PROPOSED CO	RPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and one (1) copy o	f the articles of incorporation and a check for:				
X \$70.00 ☐ \$78.75 Filing Fee Filing Fee & Certificate of Stat	& Certificate o Status				
	ADDITIONAL COPY REQUIRED				
FIRST NAME: AMEDI FROM: 2 LAST NAMES: BC	Name (Printed or typed)				
3845 27TH PKWY					
	Address				
SARASOTA, FLORI	SARASOTA, FLORIDA 34235				
	City, State & Zip				
(941) 879-2191					
	aytime Telephone number				
LOPEZCLARA92@\	o be used for future annual report notification)				
H_mail address: I t	o de usec do futilis amium icoon agamoniou/				

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

(H200002612393)

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

ne name of the corp	pration shall be: AMED & LENA	TRUCKING INC	_
RTICLE II PRI	NCIPAL OFFICE	Mailing address if different is:	
Principal <u>street</u> address 3845 27TH PKWY		Mailing address, if different is: 3845 27TH PKWY	
	FLORIDA 34235	SARASOTA, FLORIDA 34	1235
RTICLE III PUI	POSE the the corporation is organized is:		,
	LAWFUL BUSINESS		
	*****		·
		, ,	
-			
 			
RTICLE IV SHA	IRES 400		
RTICLE IV SHA	IRES of stock is: 100	—	
e number of shares	of stock is: 100		
e number of shares	of stock is: 100 TAL OFFICERS AND/OR DIRECTORS	Z.PRESIDENT	
e number of shares	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle AMED BONACHEA GONZALE	Z. PRESIDENT Address:	
RTICLE V INIT	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle AMED BONACHEA GONZALE	 -	
RTICLE V INIT	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle: AMED BONACHEA GONZALE 3845 27TH PKWY	 -	
RTICLE V INIT Name and T Address	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle: AMED BONACHEA GONZALE 3845 27TH PKWY	Address:	
RTICLE V INIT Name and T Address	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS alle AMED BONACHEA GONZALE 3845 27TH PKWY SARASOTA, FLORIDA 34235 Ble: LENA MARINA ECHEMENDIA	Address:	
RTICLE V INIT Name and T Address Name and Ti	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle AMED BONACHEA GONZALE 3845 27TH PKWY SARASOTA, FLORIDA 34235 tle: LENA MARINA ECHEMENDIA	Address:	
RTICLE V INIT Name and T Address Name and Ti	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle AMED BONACHEA GONZALE 3845 27TH PKWY SARASOTA, FLORIDA 34235 LENA MARINA ECHEMENDIA 3845 27TH PKWY	Address:	
Name and Ti Address	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle AMED BONACHEA GONZALE 3845 27TH PKWY SARASOTA, FLORIDA 34235 LENA MARINA ECHEMENDIA 3845 27TH PKWY	Address: Name and Title: Address:	

Name and	Title:	Name and Title:	
Address		Address:	
ARTICLE VI R	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	AMED BONACHEA GONZALEZ		
Address:	3845 27TH PKWY		
	SARASOTA, FL 34235		
ARTICLE VII	INCORPURATOR		
The name and ad	dress of the incorporator is:		
Name:	AMED BONACHEA GONZALEZ		
Address:	3845 27TH PKWY		
	SARASOTA, FL 34235	_	
Effective date, if	EFFECTIVE DATE: other than the date of filing: 08-04-2020 ate is listed, the date must be specific and cannot	. (OPTIONAL) t be more than five days prior	or 90 days after the
Note: If the date the document's ci	inserted in this block does not meet the applicable fective date on the Department of State's records.	statutory filing requirements, th	is date will not be listed as
Having been nam certificate, I um fo	ed as registered agent to accept service of process for amiliar with and accept the appointment as register.	or the above stated corporation a ed agent and agree to act in this	t the place designated in this capacity
XIA			08-04-2020
· \ Week	Required Signature/Registered Agent		Date
I submit this doc document to the I	ument and affirm that the facts stated herein are Department of State constitutes a third degree felony	true. I um aware that the false v as provided for in s.817.155, F	information submitted in a .S.
			08-04-2020
Required Signatu	re/Incorporator	Date	