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(((H20000313418 3)))



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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:

FLORIDA PROFIT/NON PROFIT CORPORATION L & V HAULING TRANSPORT INC

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COVER LETTER

H200003134183

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

P. O. Box 6327 Tallahassee, FL 32314					
SUBJECT: L+V + QULING Transport Inc (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)					
Enclosed are an original and one (1) copy of the artic	eles of incorporation and a check for:				
\$70.00	☐ \$78.75 ☐ \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED				
4147 Stirlin Davie, Fl (561) 72(VICRA (Printed or typed) A RA # 201 SEP - 9 PH 4:5 State & Zip D - 9756				
Laura.VIC	for future annual report notification)				

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

ARTICLES OF INCORPORATION

H200003134183

	In compliance with Chapter 607 and	or Chapter 621, F.S. (Profit)			_
ARTICLE I NAME The name of the corpora		lling Trans	DORT	Inc	
ARTICLE II PRIN	<u>CIPAL OFFICE</u>				
Austra Ci-	Principal street address	Mailing add	ress, if differe	~ 1	_
4147 011	2LING KO # 201	414157	ICLIO	a Ra#	201
Davic, F	L 33314	Davie.	Fl 3	13314	
ARTIÇLE III PURP	OSE				
The purpose for which	the corporation is organized is:	<u> </u>		_ -	
any av	ed all Lawful	BUSINESS			
					
					
					
			<u>;-</u>	2020	
			<u> </u>	J SEP	
ARTICLE IV SHAR			7.	1 5	
The number of shares of	Stock is: / / C		72.L	- 1∏ 0 1∏	
ARTICLE V INITIA	AL OFFICERS AND/OR DIRECTORS	1	:	⊐ .	
Name and Title	· IMITA A VIETTA EVE	Dalle and Title			
	UNI Sticling Od		 		
Address	H20.	Address:	<u>-</u>		
	# ZUI	· · ·		 ,	
	Davie, FL3331	<u> </u>			
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Name and Title	: <u></u>	Name and Title:			
Address		Address:			
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Name and Title	·	Name and Title:			
Address		Address:			

20, 02:26p	Three_	ĸ	3058875844	p. 4
				H200083134183
Name	and Title:_	Name	and Title:	11,00
Addr	ress _	Addre	ess:	
	-			
	-			
ARTICLE VI The name and Name:		reet address (P.O. Box NOT acceptable) of the regi	stered agent is:	
Address:	DC AI	41 Stirling Ka#20 Wie, FL 33314) [
ARTICLE VI	I INCOR	<u>PORATOR</u>		
The name and Name: Address:	l address of	AUTA A. VICTA 4147 STICLING ROFF DAVIE, FL 33314	201	
Effective date,	, if other tha	CTIVE DATE: $09-03-20$ and the date of filing: $09-03-20$ sted, the date must be specific and cannot be mo		er or 90 days after the
		in this block does not meet the applicable statutor, date on the Department of State's records.	y filing requirements, t	his date will not be listed as
	m fam il iar v	gistared agant to accept survice of process for the ab with and accept the appointment as registered agent		
		Required Signature/Registered Agent		Date
document to th	rk Departme Lli	nd affirm that the facts stated herein are true. I a ent of State constitutes a third degree felony as prov	rided for in s.817.155, 1	
Required Signs	ature/Incorp	porator	Date	1 /