

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.

(((H20000338632 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	Division of Co Fax Number	: (850)617-6381
From:		
	Account Name	: FANJUL ENTERPRISES LLC
	Account Number	: 12019000080
	Phone	: (305)603-8791
	Fax Number	: (877)503-6086

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION CORPORACION FABELO TRUCKS INC

Certificate of Status	0	
Certified Copy	0	
Page Count	01	
Estimated Charge	\$70.00	

7873 SEP

29 PH

7

	5036086 To:	Fax: (850) 617-6381	Page: 2 of 3 09/29/202
		OF INCORPORATION	
		er 607 and/or Chapter 621, F.S. (F	rohi)
ARTICLE 1 NA The name of the cor	AME CORPORACION I poration shall be:	FABELO TRUCKS INC	
<u>ARTICLE II PI</u>	RINCIPAL OFFICE Principal street address	Maili	ng address, if different is:
14041 SW 48TH S	Τ		
ARTICLE III PU	<u>URPOSE</u> hicb the corporation is organized is:		
ANY AND ALL	LAWFUL PURPOSES		<u> </u>
			<u> </u>
		-	
ARTICLE V J	res of stock is: 1000 NITIAL OFFICERS AND/OR DIREC d Title: ENRIQUE FABELO MIRANDA	<u>TORS</u>	-
Name an	d Title:	Name and Lille:	
Address	A LO A CHALADTH OT		
Address	14041 SW 48TH ST	Address:	
Address	14041 SW 48TH ST MIAMI, FL 33175		
Address			
		Address:	
	MIAMI, FL 33175	Address:	
Name and	MIAMI, FL 33175	Address:	
Name and	MIAMI, FL 33175	Address:	
Name and Address	MIAMI, FL 33175	Address:	
Name and Address	MIAMI, FL 33175	Address:	
Name and Address	MIAMI, FL 33175	Address:	
Name and Address Name and	MIAMI, FL 33175	Address:	
Name and Address Name and	MIAMI, FL 33175	Address:	· · · · · · · · · · · · · · · · · · ·

.

:

:

From: Robert Fanjul	Fax: 18775036085	To:	Fax: (850) 617-6381	Page: 3 of 3	09/29/2020 11:42 AM
	Name and Title:		Name and Title:		
	Address		Address:		
	_			. <u> </u>	
	_		<u> </u>	. <u> </u>	· · · · · · · · · · · · · · · · · · ·
		et address (P.O. Box NO	Facceptable) of the registered agent is	5.	
Nam	ENRI(QUE FABELO MIRANDA			
Add		SW 48TH ST			
		I, FL 33175			
ART	ICLE VII INCORP	<u>ORATOR</u>			
The	name and address of t	he Incorporator is:			
N	ame: Ei	NRIQUE FABELO MIRAN	DA		
	14	1041 SW 48TH ST			

(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.)

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _

MIAMI, FL 33175

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.

(OPTIONAL)

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

Х

Х

Address:

Required Signature/Registered Agent

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.

× 9/28/2020

2020

Required Signature/Incorporator