10/19/2020

Division of Corporations

## Florida Department of State

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(((H200003635173)))



H200003635173ABC.

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To:

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.\*\*

## FLORIDA PROFIT/NON PROFIT CORPORATION E GRUEIRO TOWING INC

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**COVER LETTER** 

#200003635173

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

SUBJECT: E. GYUÇÎ (O TOWÎNG LOC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

FROM: JOSE Grytiro
Name (Printed or typed)
3201 SW 138th Ot
Address
Miami FL 33175
City, State & Zip
<u> 305 - 909 - 5890</u>
Daytime Telephone number
JOSE Grueiro 6622@gmail. Em
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

H20200 3635/1

In compliance with Chapter 607	and/or Chapter 6	521. F.S.	(Profit)
•	The second second	٠٠٠, ١,٠٠٠	(LIOHI)

The name of the corporation	on shall be:	Cirue	110-	MONIC	O Ina
3201 SW	PAL OFFICE Tincipal street address	<u>ナ -</u>	-32	Mailing address, if	different is:
ARTICLE III PURPOS The purpose for which the	E corporation is organiz	sed is: WEUV	IVII USINE	OMI, F	13317
ARTICLE IV SHARES The number of shares of stoce  ARTICLE V INITIAL O	ok is: 100 DFFICERS AND/OR I	PIRECTORS	- ecicloud		
Address 3	201 SW 138 Miami, F	L 33175	diress:		
Name and Title:			ame and Title:		
					20 <b>20</b> OCT
Name and Title:					19 PM 3: 33
<del></del>					

Name and Title:	Name and Title:	H200003635773			
Address	Address:				
	Address				
	<del>-</del> -				
ARTICLE VI REGISTERED AGENT					
The name and Florida street address (P.O. Box NOT acceptable) of	of the registered agent	t is:			
Name: OUST CTUCTO	-				
Address: 3201 SN 1387 C1 Miami FL 33175	<del></del>				
	_	202			
ARTICLE VII INCORPORATOR		; ` 2020 OCT			
The name and address of the Incorporator is:	~	· <del></del>			
Name:	<u>Q</u>	9			
Address: 320 SW 138 (	_(	<u>≅</u>			
Mani FL 3317	_5	3: 33 3: 33 3: 11:			
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:	020_ <sub>(OPT</sub>	TONAL)			
(If an effective date is listed, the date must be specific and cann filing.)	ot be more than five	e days prior or 90 days after the			
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	e statutory filing requ	uirements, this date will not be listed as			
Having been named or registered agent to accept service of process j certificate, I am fandillar with and accept the appointment as register	for the above stated cored agent and agree t	orporation at the place designated in this to act in this capacity			
		10-19-2020			
Required Signature/Registered Agent	- #1	Date			
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a Topument to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.					
( Auto)	y promise we	10-19-2020			
Required Rignature/Incorporator		Date 10-11-2020			