1/13/2021

Division of Corporations

## ctronic Filing Cover Sheet

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(((H210000176143)))



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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 JOSE GONZALEZ CABRERA CORP

Certificate of Status	0
Certified Copy	0
Page Count	04
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Help

3058875844 p.2 (H210000176143)

## COVER LETTER

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

SUBJECT: JOSE GONZALEZ COLVETA COLP.						
Enclosed are an original and one (1) copy of the artic	les of incorporation and	a check for:				
₱\$70.00 □ \$78.75 Filing Fee Filing Fee & Certificate of Status	☐ \$78.75 Filing Fce & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status				
ADDITIONAL COPY REQUIRED						
FROM: JOSE GONZALEZ Cabrera  Name (Printed or typed)						
825 NW 44th CWO Lot A 108						
Miami, FL 33134						
Daytime Telephone number  CONZALCZ DSC 1768 @QMAIL. COM  E-mail address: (to be used for future annual report notification)						

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

	(4	1210000176143)
ART: In compliance with	ICLES OF INCORPORATION  h Chapter 607 and/or Chapter 621, F.S. (Prof	it)
ARTICLE I NAME The name of the corporation shall be:	: Gonzaltz Cal	orera Corp.
ARTICLE II PRINCIPAL OFFICE Principal street address  825 NW 44 <sup>th</sup> Ave Lo	FA108 <u>8251</u>	ddress, if different is:  1044 Ave Lot A F7 33134
ARTICLE III PURPOSE  The purpose for which the corporation is organized  And	auful busine	SS
ARTICLE IV SHARES The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS AND/OR I	DIRECTORS O	
Name and Title: JOSE GONZALE	z Cabrera, President	
Address <u>\$25 NW44</u> 6 LOT A108	Address:	
Miami, FL	33134	
Name and Title:	Name and Title:	
	<del></del>	
Name and Title:	Name and Title:	

13 2021 5:14pm Three	ee_K	;	3058875844	p.4
Name and Title	:	Name and Title:	(H21000C	176143
Address		Address:		
		_		
	STERED AGENT			
The name and Florida  Name:  Address:	street address (P.O. Box NOT acceptable) CSC GONZOLEZ CON 25 NU 144th (UP) [	of the registered ages LCT TAIOS	nt is:	
<u> </u>	Vianni Pl 33134			
ARTICLE VII INCO	RPORATOR			
The name and address  Name:	of the Incorporator is: SOSE GONZALEZ CA 325 NW 44th AND MIAMIFL 3312	ibrera Iot Aios 54	? S	
ARTICLE VIII EFF Effective date, if other (If an effective date is filing.)	than the date of filing: 1 - 1 - 2 - 3 - 3 - 1 - 1 - 3 - 3 - 3 - 3 - 3 - 3		TIONAL) ve days prior or 90 de	ays after the
	ed in this block does not meet the applicable date on the Department of State's records		quirements, this date w	rill not be listed as
Having heen named as certificate, I am familia	registered agent to accept service of process with and accept the appointment as regist	for the above stated ered agent and agree	corporation at the place to act in this capacity	re designated in this
0/1/h	Required Signature/Registered Agent		<u> 01-</u>	Date Date
I submit this documen document to the Depart	t and affirm that the facts stated herein ar timent of State constitutes a third degree felo	re true. I am aware my as provided for in	s.817.155, F.S.	(
Required Signature/Inc	orporator		01-1 Date	3-2021

Required Signature/Incorporator