1/22/2021



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.

(((H21000029741 3)))



H210000297413ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : ARIMIR SERVICES GROUP LLC

Account Number : I20200000022

Phone : (305)420-5722

Fax Number : (3

: (305)643-5225

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Milda pereznino Chorrail CON

## FLORIDA PROFIT/NON PROFIT CORPORATION DYD TRANSPORT INC

Certificate of Status	1
Certified Copy	0
Page Count	_ 03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

D O'KEEFE JAN 2 6 2021 1/25/2021 10:21:21 AM PAGE 1/001 Fax Server

January 25, 2021

FLORIDA DEPARTMENT OF STATE Division of Corporations

ARIMAR SERVICES GROUP

SUBJECT: DYD TRANSPORT INC

REF: W21000007231

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name in article 1 and cover letter letter must match,

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section

FAX Aud. #: B21000029741 Letter Number: 221A00001631

## ARTICLES OF INCORPORATION

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

TCLE II P	RINCIPAL OFFICE		
	Principal street	M	failing address, if different is:
	4601 SW 97 CT MIAMI,FL 33165		<del></del>
·		<del>_</del>	
ICLE III P	UDDACE		
purpose for wi	hich the corporation is organized is:	ANY AND ALL LAWFUL B	USINESS
•			
			· — — — — — — — — — — — — — — — — — — —
	<del></del>		<del>.</del>
	<del></del>		
CLE IV SH	IARFS		
umber of share	s of stock is: 1,000		
	3 01 3(0CK (3. =/		
unioci di siluc	3 01 Stock (3.		· 2
		ND/OR	21 J
ART	ICLE V INITIAL OFFICERS A		
ART			J& 28
ART	ICLE V INITIAL OFFICERS A	ieto- PresidenName and Title:	25 25 ES
ART	TCLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr 4601 SW 97 CT	ieto- PresidenName and Title:	20
<u>ART</u> DIRECTO <u>I</u>	ICLE V INITIAL OFFICERS A	ieto- PresidenName and Title:	200
<u>ART</u> DIRECTO <u>I</u>	TCLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr 4601 SW 97 CT	ieto- PresidenName and Title:	20 P
<u>ART</u> DIRECTO <u>I</u>	TCLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr 4601 SW 97 CT	ieto- PresidenName and Title:	25. 23 25. 23 27. 23 27. 25 27. 25 27
<u>ART</u> DIRECTO <u>I</u>	TCLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr 4601 SW 97 CT	ieto- PresidenName and Title:	20 P
ART DIRECTOR Address	TCLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr 4601 SW 97 CT	eto- PresidenName and Title:Address:	1. 25 PH 5. 41
ART DIRECTOR Address Name and T	ICLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr. 4601 SW 97 CT. MIAMI,FL 33165	Address:  Name and Title:  Name and Title:	1. 25 PH 5. 41
ART DIRECTOR Address	ICLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr. 4601 SW 97 CT. MIAMI,FL 33165	eto- PresidenName and Title:Address:	1. 25 PH 5. 41
ART DIRECTOR Address Name and T	ICLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr. 4601 SW 97 CT. MIAMI,FL 33165	Address:  Name and Title:  Name and Title:	1. 25 PH 5. 41
ART DIRECTOR Address Name and T	ICLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr. 4601 SW 97 CT. MIAMI,FL 33165	Address:  Name and Title:  Name and Title:	1. 25 PH 5. 41
ART DIRECTOR Address Name and T	ICLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr. 4601 SW 97 CT. MIAMI,FL 33165	Address:  Name and Title:  Name and Title:	1. 25 PH 5. 41
ART DIRECTOR Address Name and T	ICLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr. 4601 SW 97 CT. MIAMI,FL 33165	Address:  Name and Title:  Name and Title:	1. 25 PH 5. 41
ART DIRECTOR Address Name and T Address	ICLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr. 4601 SW 97 CT MIAMI,FL 33165	Address:  Name and Title:  Name and Title:  Address:	5 23 4 T
ART DIRECTOR Address Name and T Address	ICLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr. 4601 SW 97 CT. MIAMI,FL 33165	Address:  Name and Title:  Name and Title:  Address:	5 23 4 T
ART DIRECTOR Address Name and T Address	ICLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr. 4601 SW 97 CT MIAMI,FL 33165	Name and Title:	5 23 4 T
ART DIRECTOR Address Name and T Address	ICLE V INITIAL OFFICERS A RS Name and Title: Darien Perez Pr 4601 SW 97 CT MIAMI,FL 33165	Name and Title:	JA: 25

Name :	and Title:	Name and Title:
Address		Address:
		<del></del>
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT a	cceptable) of the registered agent is:
Name:	Darien Perez Pricto	
Address:	4601 SW 97 CT	
	MIAMI, FL 33165	<u>~ 2</u>
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	70 Table 1
Name:	Darien Perez Prieto	
Address:	4601 SW 97 CT	<u>=</u>
	MIAMI, FL 33165	
Effective date, if	EFFECTIVE DATE: other than the date of filing: late is listed, the date must be specific	. (OPTIONAL) and cannot be more than five days prior or 90 days after the
Note: If the date the document's e	inserted in this block does not meet the ffective date on the Department of State	applicable statutory filing requirements, this date will not be listed 's records.
Having been name certificate, I am fo	ned as registered agent to accept service of amiliar with and accept the appointment	f process for the above stated corporation at the place designated in t as registered agent and agree to act in this capacity
	Required Signature/Registered	Agent $01 - 22 - 26$ Cf
I submit this doci	ument and affirm that the facts stated to Department of State constitutes a third de	verein are true. I am aware that the false information submitted in gree felony as provided for in s.817.155, F.S.
7	ALL.	
Required Signatur	e/Incorporator	Date Date