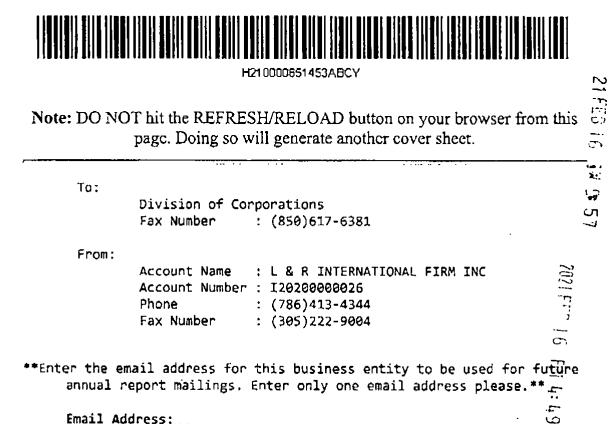
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Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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.

(((H210000651453)))



FLORIDA PROFIT/NON PROFIT CORPORATION J NOA TRANSPORT CORP

Certificate of Status	0
Certified Copy	0
Page Count	04
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COVER LETTER

H21000065145 3

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

SUBJECT: J NO	DA TRANSPORT CORP		
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCLI</u>	J <u>DE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
	☐ \$78.75 Filing Fcc & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM: E	NMANUEL NOA CUBA Name	(Printed or typed)	
14	624 SW 280 ST STE 201	, ,	
		ddress	
нс	DMESTEAD, FL 33032	State & Zip	
<u>78</u>	6 - 760 - 3831 Daytime To	elephone number	
enr	manuelnoa@gmail.com		
	E-mail address: (to be used	i for future annual report i	ottrication)

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

ARTICLES OF INCORPORATION

H21000065145 3

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

<u>ARTICLE I NA</u>	AME INCATRANCOCT	CORD	
The name of the cor	rporation shall be: J NOA TRANSPORT	CORP	
ARTICIFII PI	RINCIPAL OFFICE		
ZIKTICEETI 11	Principal street address	Mailing address, if differen	nt is:
14624 SW 280 ST	STE 201	14624 SW 280 ST STE 201	
HOMESTEAD, FL 33	<u></u>	HOMESTEAD, FL 33032	
			2
			-T1
ARTICLE III P	URPOSE AND AND	ALL LAVAIEUL DUIGINEGO	(2)
The purpose for wh	hich the corporation is organized is: ANY ANE	ALL LAVVEUL BUSINESS.	
			တ
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			3 (
			₩.
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	•		
4071215111 6	# 4 B F C	•	
The number of share	res of stock is: 1000		
The named of size	C3 07 ROCK IS.		•
ARTICLE V II	NITIAL OFFICERS AND/OR DIRECTORS		
Noma one	Title: ENMANUEL NOA CUBA / PRESIDENT	Name and Title:	
Nume and			
Address	14624 SW 280 ST STE 201	Address:	
	HOMEOTEAD EL 22022		
	HOMESTEAD, FL 33032		
Nume and	Title:	Name and Title:	
Address		Address:	
			
Name and	Title:	Name and Title:	
Address		Address:	
			

 . • •		•
H210000651	45	3
 	•	
 	•	

Name and	Title:	Name and Title:
Address		Address:
ARTICI EVI RI	EGISTERED AGENT	
	rida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	FRANCO ROBLES	
Address:	8410 W FLAGLER ST STE 205	_
	MIAMI, FL 33144	_
ARTICLE VII II	<u>VCORPORATOR</u>	
The name and add	ress of the Incorporator is:	
Name:	FRANCO ROBLES	·
Address:	8410 W FLAGLER ST STE 205	, -
	MIAMI, FL 33144	-
ARTICLE VIII 1	EFFECTIVE DATE: ther than the date of filing: 02 / 15 / 2021	. (OPTIONAL)
(If an effective da filing.)	te is listed, the date must be specific and cannot	of the more than five days prior or 90 days after the
	nserted in this block does not meet the applicable ective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
Having been name certificate, I am fai	rd as registered agent to accept service of process f miliar withand accept the appointment as registed	or the above stated corporation at the place designated in this red agent and agree to act in this capacity
	4/10 H/23.	02/15/21
	Required Signature/Registered Agent	/ Dale
	ment and differn that the facts stated herein are epartment of State constitutes a third degree felon	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.
	on ofes3.	Date 02/15/2/
Required Signature	e/Incorporator	Date -
ĺ/	<i>'</i>	