

P210000018785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

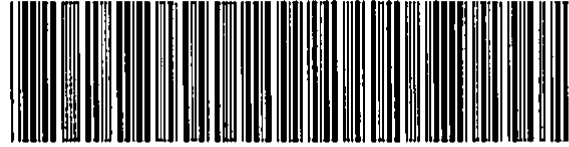
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300355798353

02/08/21--01036--015 \*\*78.75

FILED  
2021 FEB 18 AM 10:03  
SECRETARY OF STATE  
TALLAHASSEE, FL

AB

TO: DEPARTMENT OF STATE  
NEW FILING SECTION  
DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE, FL 32314

FROM: MARIA E MENDIOROZ  
1521 NW 36<sup>TH</sup> AVE  
MIAMI, FL 33125  
954-839-5893

RE: REVOKING RIGHTS TO DOCUMENT #P18000054340 AND FILING NEW CORPORATION  
WITH SAME NAME

NEW FILING SECTION, DIVISION OF CORPORATIONS;

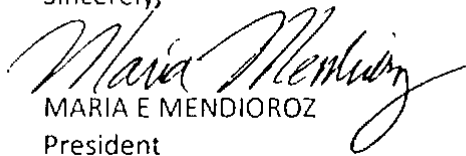
Please be advised that we will not use the previous State document #P18000054340 and  
revoke the rights to the aforementioned State document #.

We are submitting a new application for a new corporation and State document # using the same name  
of OTR FREIGHT, INC.

Please accept the attached articles of incorporation and fees of \$78.75.

If you have any questions, please feel free to contact me.

Sincerely,

  
MARIA E MENDIOROZ  
President

## COVER LETTER

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

SUBJECT: **OTR FREIGHT, INC**

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee.  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

FROM: **MARIA E MENDIOROZ**

Name (Printed or typed)

**1521 NW 36TH AVE**

Address

**MIAMI, FL 33125**

City, State & Zip

**954-839-5893**

Daytime Telephone number

**ajulissaflores6@gmail.com**

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

FILED

ARTICLE I NAME

The name of the corporation shall be: OTR FREIGHT, INC

2021 FEB 18 AM 10:03

ARTICLE II PRINCIPAL OFFICE

Principal street address  
1521 NW 36TH AVE  
MIAMI, FL 33125

Mailing address, if different is:  
SAME SECRETARY OF STATE  
TALLAHASSEE, FL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIA E MENDIOROZ, PRESIDENT

Name and Title: \_\_\_\_\_

Address 1521 NW 36TH AVE

Address: \_\_\_\_\_

MIAM, FL 33125

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARIA E MENDIOROZ  
Address: 1521 NW 36TH AVE  
MIAMI, FL 33125

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: MARIA E MENDIOROZ  
Address: 1521 NW 36TH AVE  
MIAMI, FL 33125


**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

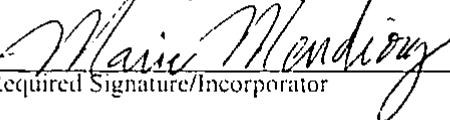
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**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.

*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*

 02/02/2021  
Required Signature/Registered Agent Date

*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.*

 02/02/2021  
Required Signature/Incorporator Date

## COVER LETTER

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

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& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: **MARIA E MENDIOROZ**

Name (Printed or typed)

**1521 NW 36TH AVE**

Address

**MIAMI, FL 33125**

City, State & Zip

**954-839-5893**

Daytime Telephone number

**ajulissaflores6@gmail.com**

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

FILED

2021 FEB -8 AM 10:03

ARTICLE I NAME

The name of the corporation shall be: OTR FREIGHT, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

1521 NW 36TH AVE

MIAMI, FL 33125

SECRETARY OF STATE  
SAME  
TALLAHASSEE, FL

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The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIA E MENDIOROZ, PRESIDENT

Name and Title: \_\_\_\_\_

Address 1521 NW 36TH AVE

Address: \_\_\_\_\_

MIAM, FL 33125

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Name: MARIA E MENDIOROZ  
Address: 1521 NW 36TH AVE  
MIAMI, FL 33125

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

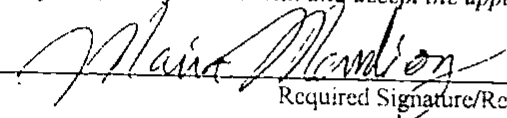
Name: MARIA E MENDIOROZ  
Address: 1521 NW 36TH AVE  
MIAMI, FL 33125

**ARTICLE VIII EFFECTIVE DATE:**

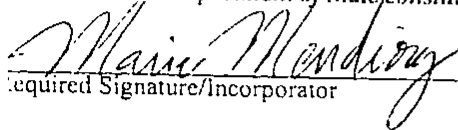
Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL)  
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 Required Signature/Registered Agent 02/02/2021 Date

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 Required Signature/Incorporator 02/02/2021 Date