

PZL 000030704

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.

(((H21000136391 3)))



H210001363913ABC-..

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 : TAX 4 TRUCKS INC
Account Number : I20190000100
Phone : (305)764-3080
Fax Number : (305)675-6155

2021 APR -6 AM 11:32
STATE
TALLAHASSEE, FLORIDA

FILED

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

Email Address: JORGE@TAX4TRUCKS.COM

FLORIDA PROFIT/NON PROFIT CORPORATION
NARY TRANSPORT INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

2021 APR -6 PM 12:34
COMMERCIAL
SERVICES

Electronic Filing Menu

Corporate Filing Menu

Help

T. BURCH
APR - 7 2021

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

ARTICLE I NAMEThe name of the corporation shall be: NARY TRANSPORT INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

755 S. Quebrada STClewiston, FL 33440**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: YORLAN GUERRA

Name and Title: _____

Address 755 S. Quebrada ST

Address: _____

Clewiston, FL 33440

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
2021 APR -6 AM 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: YORLAN GUERRA
Address: 755 S. Quebrada ST
Clewiston, FL 33440

FILED
2021 APR -6 AM 11:32
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: YORLAN GUERRA
Address: 755 S. Quebrada ST
Clewiston, FL 33440

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

Yorlan Guerra 4/6/2021
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.

Yorlan Guerra 4/6/2021
Required Signature Incorporator Date