P21000069720

(Reques	tor's Name)	
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PICK-UP	WAIT MAIL	
(Busines	ss Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

ENTITY NAME_Fro	ont Page Trucking Corp)
DOCUMENT NUMB	ER	
•	**PLEASE FILE	THE ATTACHED AND RETURN**
	Plain Copy	
XXXX	Certified Copy	
	Certificate of Status	
	Certified Copy of Ar Certified Copy of Ar Certificate of Status	ts & Amendments Complete File (Including Annual Reports)
	APOSTILLE',	/ NOTARIAL CERTIFICATION
COUNTRY OF DESTI	NATION	
NUMBER OF CERTIF	ICATES REQUESTED	
TOTAL OWED \$ 7	8,75	ACCOUNT # 120140000108 Cuth United Corporate Services, Inc. Thank you so much!

COVER LETTER

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

SUBJECT: Front	Page Trucking Corp. (PROPOSED CORPORA	TE NAMÉ - MUST INCL	UDE SUFFIX)
	·		
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	ra check for.
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
		ADDITIONAL CO	DPY REQUIRED
	nmy Germain Nam 4 South King Street	e (Printed or typed)	
20-		Address	
Eir	nont, NY 11003		
	City	, State & Zip	
	646-62	5-9444	
	Daytime	l'elephone number	
	executivetr	ansporter@gmail.com	
	E-mail address: (to be use	d for future annual report r	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)

ARTICLE I NAM The name of the corpo		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ARTICLE II PRI. 13194 US Highway 301 Riverview, Florida 3357	NCIPAL OFFICE Principal <u>street</u> address S, Sulte # 420	SECRETAIN STATE
ARTICLE III PUR The purpose for whic Running a Truc	h the corporation is organized is:	
<u>ARTICLE V INIT</u>	of stock is: 200 shares with out pary	
Name and T Address	224.6. 41.16.	Name and Title:Address:
	Elmont, NY 11003	
Name and Ti	_{tle:} <u>Jimmy Germain, Director</u>	Name and Title:
Address	234 South King Street	Address:
	Elmont, NY 11003	
Name and Ti	tle:	Name and Title:
Address		Address:

Name and	d Title:	Name and Title:	
Address		Address:	
			
	 		
			
1RTICLE VI	REGISTERED AGENT	No. 11 No. Cello annice and account in	
The <u>name and Fl</u>	Jimmy Germain	OT acceptable) of the registered agent is:	
	-		
Name:	194 US Highway 301S, Suite # 420 Riverview, Florida 33578		
rame.			
Address:			
			ZZZ AUG FOREN TALL
ARTICLE VII	<u>INCORPORATOR</u>		
The <u>name and ad</u>	dress of the Incorporator is:		±/√
Maria	Ed Lingue		AH IO: SE
Name:	Ed Linzer); S
Address:	5 Brewster Street, Suite 374	4	TE 35
	Glen Cove, NY 11542		
ADTICLE VIII	EFFECTIVE DATE:		
Effective date, if	other than the date of filing:	(OPTIONAL)	
If an effective d iling.)	ate is listed, the date must be sp	ecific and cannot be more than five days pri	or or 90 days after the
Note: If the date	inserted in this block does not me ffective date on the Department o	et the applicable statutory filing requirements,	this date will not be listed as
no document a c			
aving been name artificate, I am far	d as registered agent to accept serv niliar with and accept the appoints	vice of process for the above stated corporation a ment as registered agent and agree to uct in this c	t the place designated in this capacity
Jimmy Germain,		August 2 nd , 2021	
equired Signature	Registered Agent Date		
submit this doc focument to the	ument and affirm that the facts s Department of State constitutes a	stated herein are true. I am aware that the fals third degree felony as provided for in s.817.15.	e information submitted in 6 5, F.S.
/s/ Ed Linzer			August 2**, 2021
Required Signatu	re/Incorporator	Date	C