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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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H210003005263ABCT

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : THREE K FAST CARRIER SERVICES INC  
Account Number : I20180000033  
Phone : (305)805-3516  
Fax Number : (305)887-5844

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

Email Address: Guilleglez15@ICloud.com

FLORIDA PROFIT/NON PROFIT CORPORATION  
LAKE TRANSPORT INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

21 AUG -9 PM 6:07

2021 AUG -9 PM 4:56

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(H210003005263)

## COVER LETTER

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

SUBJECT: **LAKE TRANSPORT 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: **GUILLERMO GONZALEZ REYES**  
Name (Printed or typed)

**35 ICE PLANT RD**

Address

**LAKE HARBOR, FL 33440**

City, State & Zip

**786-518-0356**

Daytime Telephone number

**GUILLEGLEZ15@ICLOUD.COM**

E-mail address: (to be used for future annual report notification)

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

(#210003005263)

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

ARTICLE I NAME

The name of the corporation shall be: LAKE TRANSPORT INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

35 ICE PLANT RD  
LAKE HARBOR, FL 33440

840 E 10TH AVE  
HIALEAH, FL 33010

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: GUILLERMO GONZALEZ REYES, PRES

Address: 840 E 10TH AVE

HIALEAH, FL 33010

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

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:

Address:

Guillermo Gonzalez Reyes  
340 E. 10<sup>th</sup> Ave  
Hialeah, FL 33010

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name:

Address:

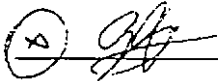
Guillermo Gonzalez Reyes  
340 E. 10<sup>th</sup> Ave  
Hialeah, FL 33010

**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: 08/09/21 (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*



Required Signature/Registered Agent

08/09/21  
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.*



Required Signature/Incorporator

08/09/21  
Date