

8/12/2021

Division of Corporations

P210000303948367

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

*P
8/13/21*

From: Account Name : FANJUL ENTERPRISES LLC
Account Number : I20190000080
Phone : (305)603-8791
Fax Number : (877)503-6086

SECRETARY OF STATE
TALLAHASSEE, FL

2021 AUG 12 PM 6:30

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: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
SHIPPING TECHNICIAN CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2021 AUG 12 AM 10:05

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: SHIPPING TECHNICIAN CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10715 SW 7TH ST
MIAMI, FL 33174

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL PURPOSES

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RICARDO PEREZ RAMIREZ-P Name and Title: _____

Address: 10715 SW 7TH ST Address: _____
MIAMI, FL 33174

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

2021 AUG 12 PM 6:30
SECRETARY (ES/INT)
TALLAHASSEE, FL

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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: RICARDO PEREZ RAMIREZ
 Address: 10715 SW 7TH ST
MIAMI, FL 33174

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: RICARDO PEREZ RAMIREZ
 Address: 10715 SW 7TH ST
MIAMI, FL 33174


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

X 
 Required Signature/Registered Agent

X 8/10/2021
 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.

X 
 Required Signature/Incorporator

X 8/10/2021
 Date

DEPARTMENT OF STATE
 TALLAHASSEE, FL
 08/12/2021 6:30
 FILED