8/9/2021

Division of Corporations Florida Departr

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

 \overline{c}

Account Name : THREE K FAST CARRIER SERVICES INC

Account Number : I20180000033

: (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:

FLORIDA PROFIT/NON PROFIT CORPORATION

APS TRUCK INC

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(H210003005413)

COVER LETTER

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

SUBJECT:	APS TRUCK INC			
	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
¥ \$70,00 Filing Fea		□ \$78.75 Filing Fec & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
ADDITIONAL COPY REQUIRED				
2 Last Names				
FROM: AMAURY PUERTAS SANCHEZ Name (Printed or typed)				
1950 SW 122ND AVE APT 313				
Address MIAMI FL 33175				
•	786-260-4810	State & Zip	-	
-	AMAURYPUERTASS	EANCHEZ@YAI	HOO.COM	
-	E-mail address: (to be used	for future annual report r	otification)	

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)

<u>E II PRINC</u>		
	Principal street address	Mailing address, if different is:
SW 122N	D AVE APT 313	_1950 SW 122ND AVE APT 31:
/ii, FL 331		MIAMI, FL 33175
EIII PURPO		
	· · · · · · · · · · · · · · · · · · ·	
IND ALL	LAWFUL BUSINESS	
		·
IV SHAR	FC	
er of shares of	stock is: 100	
		
V (NITIA	U. OFFICERS AND/OR DIRECTORS	
	IL OFFICERS AND/OR DIRECTORS AMAURY PUERTAS SANCHE	=7 .
	AMALIDY DUEDTAS CANCUS	Name and Title:
Name and Tide	AMAURY PUERTAS SANCHE PRESIDENT	Name and Title:
Name and Tide	AMAURY PUERTAS SANCHE	Address:
Name and Tide	AMAURY PUERTAS SANCHE PRESIDENT	Address:
Same and Tide	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313	Address:
Name and Tide	AMAURY PUERTAS SANCHE	Address:
Name and Title	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Address:
Same and Title	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Name and Title:
Name and Tide Address ame and Title	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Name and Title:
Name and Tide Address	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Name and Title:
Tame and Title	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Name and Title:
Name and Tide Address	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Name and Title:
Name and Tide Address	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Name and Title:
Name and Title Address Name and Title Address	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Name and Title:
Name and Tide Address Vame and Title Address	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Name and Title:
Name and Tide Address Jame and Title: Address	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Nume and Title: Address: Name and Title:
Name and Title Address ame and Title Address	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Name and Title:
Name and Title Address Hame and Title Address	AMAURY PUERTAS SANCHE PRESIDENT 1950 SW 122ND AVE APT 313 MIAMI, FL 33175	Nume and Title: Address: Name and Title:

Name and Title:	(H2100030054/3)
Address	Address:
	Addition.
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT accepts	able) of the registered agent is:
Name: MUMULA VOKIAS	SHINCHEZ
Address: 450 SV 122nd 1	WE #313
Miami FL 3317	5
APTICLE VII INCORDODATOR	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	15 Camples
Name: 111111111111111111111111111111111111	LAND 11 DE
Address: (1) OSM 122nd	ME#313
141am 12 33	175
00/0	9/-
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:	1 21 . (OPTIONAL)
(If an effective date is listed, the date must be specific and filing.)	cannot be more than five days prior or 90 days after the
Note: If the date inserted in this block does not meet the app	licable statutory filing requirements, this date will not be listed as
the document's effective date on the Department of State's re	ecords.
Having been named as registered agent to accept service of pro	ocess for the above stated corporation at the place designated in this
certificate, Nam familiar with and accept the appointment as r	registered agent and agree to act in this capacity
	08/09/21
Required Signature/Registered Ages	
I submit this document and affirm that the facts stated here pocument to the Department of State constitutes a third degree	in are true. I am aware that the false information submitted in a e felony as provided for in s.817.155, F.S.
XXL)	DR 109/21
Required Signature/Incorporator	Date Date