

8/24/2021

P21000075830

Division of Corporations  
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.

(((H21000317781 3)))



H210003177813ABC/

**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 : 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:

DeToro@185@gmail.com

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**CUETORO TOWING INC**

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

Electronic Filing Menu

Corporate Filing Menu

Help

(H210003177813)

**COVER LETTER**

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

**SUBJECT: CUETORO TOWING 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: YENISSET CUEVAS DEL TORO**  
Last Name  
Name (Printed or typed)  
**701 NE 23RD ST APT 306**  
Address  
**MIAMI, FL 33137**  
City, State & Zip  
**786-280-6815**  
Daytime Telephone number  
**DELTORO0185@GMAIL.COM**  
E-mail address: (to be used for future annual report notification)

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

(H210003177813)

**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: **CUETORO TOWING INC**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

**701 NE 23RD ST APT 306**  
**MIAMI, FL 33137**

**701 NE 23RD ST APT 306**  
**MIAMI, FL 33137**

**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: **YENISET CUEVAS DEL TORO, PRES** Name and Title: \_\_\_\_\_

Address **701 NE 23RD ST APT 306** Address: \_\_\_\_\_  
**MIAMI, FL 33137**

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

21 AUG 24 PM 12:43  
RECEIVED  
CLERK OF DISTRICT COURT  
MIAMI, FL

(H 210003179813)

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: Yeniset Cuevas Del Toro  
Address: 701 NE 23rd St Apt 306  
Miami FL 33137

FILED  
21 AUG 24 PM 12:43  
TALLAHASSEE, FLORIDA

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

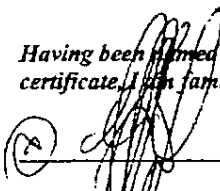
Name: Yeniset Cuevas Del Toro  
Address: 701 NE 23rd St Apt 306  
Miami FL 33137

**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: 08-24-2021 (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.)

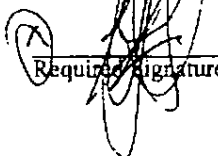
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

08-24-2021  
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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

08-24-2021  
Date