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Division of Corporations

Fax Number : (850)617-6381

From:

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Account Name : FASTKIT CORP

Account Number : 120100000009

Phone : (305)599-0839

Fax Number : (305)592-9591

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

casd 1	Address:			
CiliqTT	MOULESS.	 	 	

FLORIDA PROFIT/NON PROFIT CORPORATION

J.N.S. Trucking, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

1/1

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

ARTICLE 1 NAME The name of the corporation	shall be: J.N.S. Trucking, Inc			
ARTICLE II PRINCIP		Ма	uiling address, if different is:	
3535 N US1				
Cocoa, FL 32926				
ARTICLE III PURPOS. The purpose for which the	E corporation is organized is: Haul A	ggregate		
			<u> </u>	2021 OCT - 8
				<u>ز ز</u> ا
			Ų÷	ω
The number of shares of st	S ock is: 1,000		; ;	PH 3
ARTICLE V JNITIAL	OFFICERS AND/OR DIRECTORS		, C	3: 5 0
	Jennifert Perdomo, President	Name and Title:_	Soayma Perdomo, VP	
Address _		Address: _	3535 N US1	
-	Cocoa, FL 32926		Cocoa, FL 32926	
-				
Name and Title:_		Name and Title:_	·	
· Address _		Address:		
-				
-		TM		
Name and Title:_				
Address _		Address: _		
-				
-				

Name and T	itle:	Name and Title:	
Address		Address:	
ARTICLE VI RE	GISTERED AGENT da street address (P.O. Box NOT accept	able) of the registered agent is:	
Name: _	Jennifert Perdomo		
Address:	3535 N US1		
-	Cocoa, FL 32926		
ARTICLE VII _IN	CORPORATOR		
The name and addr	ess of the Incorporator is:		2
Name:	Jennifert Perdomo		021
Address:	3535 N US1		2021 OCT
	Cocoa, FL 32926		-8 -8
			PH T
ARTICLE VIII E	FFE TIVE DATE:	(OPTIONAL)	. ب ' آ
(If an effective date	er than the date of filing: is listed, the date must be specific and	d cannot be more than five days prior	or 90 days after the
filing.)			
	serted in this block does not meet the apportive date on the Department of State's r	plicable statutory filing requirements, thi ecords.	s date will not be listed as
Having been named certificate, I am fam	as registered agent to accept service of politicar with and accept the appointment as	rocess for the above stated corporation at registered agent and agree to act in this	the place designated in this capacity
m	MAN		10/07/2021
1 /	Required Signature/Registered Ag	ent	Date
I submit this docum document to the Dep	ent and affirm that the facts stated her variously of State constitutes a third degree	ein are true. I am aware that the false ee felony as provided for in s.817.155, F	information submitted in a S
7/1/2	MI GI		10/07/2021
Required Signature/	incorporator.	Date	
/ /	1/		