

PZ200000168

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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H220000017963ABC.

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To:

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

From:

Account Name : THREE K FAST CARRIER SERVICES INC
Account Number : I2018C000033
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: Ernesto Martinez@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION

BELLAROSE TRUCKING INC

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

H220000017963

COVER LETTER

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

SUBJECT: **BELLAROSE TRUCKING 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: **ERNESTO MARTINEZ**
Name (Printed or typed)

8000 SW 210TH ST APT 402

Address

CUTLER BAY, FL 33189

City, State & Zip

786-424-2004

Daytime Telephone number

ERNESTOMARTINEZ@GMAIL.COM

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

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

(H220000017963)

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: **BELLAROSE TRUCKING INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address

8000 SW 210TH ST APT 402
CUTLER BAY, FL 33189

Mailing address, if different is:

8000 SW 210TH ST APT 402
CUTLER BAY, FL 33189

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: **Ernesto Martinez, Pres**

Name and Title:

Address: **8000 SW 210th St Apt 402**
Cutler Bay, FL 33189

Address:

Name and Title: **Silvia J. Galindo Rosales, VP**

Name and Title:

Address: **8000 SW 210th St Apt 402**
Cutler Bay, FL 33189

Address:

Name and Title:

Name and Title:

Address:

Address:

Name and Title: _____ Name and Title: (H220000017963)
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Ernesto Martinez
Address: 8000 SW 210th St Apt 402
Cutler Bay, FL 33189

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ernesto Martinez
Address: 8000 SW 210th St Apt 402
Cutler Bay, FL 33189

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/03/2022 (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

[Signature]
Required Signature/Registered Agent

01/03/2022
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.

[Signature]
Required Signature/Incorporator

01/03/2022
Date