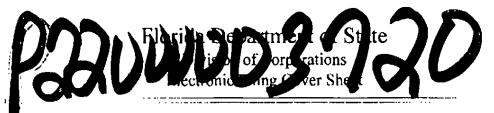
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	Division of Co.	rporations	
	Fax Number	: (850)617-6381	
From:			
	Account Name	: PEDRO JUZQUINOS	
	Account Number	: 120170000042	
	Phone	: (954) 655-8413	
	Fax Number	: (954)432-8807	

annual report mailings. Enter only one email address please.**

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION HALCON ROJO TRANSPORTATION INC

T. SCOTT JAN 19 2022

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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, F1, 32314

SUBJECT: HALCO	N ROJO TRANSPORTATION IN		
	(PROPOSED CORPOR	NTE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
		ADDITIONAL CO	OPY REQUIRED
FROM:	MEZ CORREA, HOVER Nam) SW 26111 ST	e (Printed or typed)	
		Address	
MIR	AMAR, FL 33023		
	City	, State & Zip	····
(954) 274-7970		
	Daytime 1	Telephone number	
R_R	AULSLE@HOTMAIL.COM		
 -	E-mail address: (to be use	d for future annual report	notification)

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

ARTICLES OF INCORPURATION

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

ICLE II PRINC			IF PF
0 SW 26TH ST	Principal <u>street</u> address	Mailing add	ress, if different is:
MAR, FL 33023			
<u>.</u>			
ICLEIII PURP	OSE the corporation is organized is: ANY AND A	LL LAWFUL BUSINESS	
purpose for which	the corporation is organized is		
<u> </u>			
			
			-
			
FICLE IV SHAI	RES 100 SHARES		
TICLE IV SHAI number of shares o	RES 100 SHARES		
number of shares o	RES 100 SHARES f stock is:		
number of shares o	RES 100 SHARES I stock is: AL OFFICERS AND/OR DIRECTORS		
number of shares o	RES 100 SHARES If stock is: AL OFFICERS AND/OR DIRECTORS GOMEZ CORREA, HOVER (P)		
number of shares o	RES 100 SHARES I stock is: AL OFFICERS AND/OR DIRECTORS	Name and Title:	
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number of shares of shares of shares of shares of share and Tit	RES 100 SHARES If stock is: AL OFFICERS AND/OR DIRECTORS GOMEZ CORREA, HOVER (P) 6900 SW 26TH ST	Name and Title:Address:	
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number of shares of TICLE V INITE Name and Tit Address Name and Titl Address	AL OFFICERS AND FOR DIRECTORS GOMEZ CORREA, HOVER (P) 6900 SW 26TH ST MIRAMAR, FL 33023 BEDOYA ARROYAVE, ESNEIDA (VP) 6900 SW 26TH ST	Name and Title: Address: Name and Title:	22 J.M. I.M.
number of shares of TICLE V INITE Name and Tit Address Name and Titl Address	AL OFFICERS AND FOR DIRECTORS GOMEZ CORREA, HOVER (P) 6900 SW 26TH ST MIRAMAR, FL 33023 BEDOYA ARROYAVE, ESNEIDA (VP) 6900 SW 26TH ST MIRAMAR, FL 33023	Name and Title: Address: Name and Title: Address:	22 J.M. I.M.

Name ar	nd Title:	Name and Title:	
Addres	s	Address:	
			
			_
ARTICLE VI	REGISTERED AGENT		
The mame and F	forida street address (P.O. Box NOT accepta	ble) of the registered agent is:	
Name:	GOMEZ CORREA, HOVER		
Address:	6900 SW 26TH ST		
/(uu/C33,	MIRAMAR, FL 33023		
	WOODBOR (TOR		
<u>ARTICLE VII</u>	INCORPORATOR		
The <u>name and </u>	address of the Incorporator is:		
Name:	GOMEZ CORREA, HOVER		
Address:	6900 SW 26TH ST		
	MIRAMAR, FL 33023		
4 B T (21) 21 1/8 }	EFFECTIVE DATE.		
Effective date	FFFECTIVE DATE: if other than the date of filing:	(OPTIONAL)	
(If an effective filing.)	date is listed, the date must be specific and	cannot be more than five days prior or 90 days after the	
Note: If the dathe document's	ate inserted in this block does not most the application date on the Department of State's re-	icable statutory filing requirements, this date will not be list cords.	ed as
Having been no this certificate,	amed as registered agent to accept service of p I am familiar with and accept the appointmen	process for the above stated corporation at the place design as registered agent and agree to act in this capacity	ated is
	Una Com	01/14/2022	
	Required Signature/Registered Age	nt Date	
I submit this d	ocument and affirm that the facts stated here e Department of State constitutes a third degre	in are true. I am aware that the false information submitte of felow as provided for in 5.817.155, F.S.	ed in e
оолитен и в	-		
	nuired Signature/Incorporator	Date	