Division of Corporations



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To:

From:

Division of Corporations

Fax Number : (850)617-6381

Account Name : THREE K FAST Account Number : 120180000033

: THREE K FAST CARRIER SERVICES INC

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:

Yordanydiazos agmail can

FLORIDA PROFIT/NON PROFIT CORPORATION

YDM TRANSPORTATION SERVICE CORP

Certificate of Status	0
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Feb 08 2022 1:16pm Three_K

(H220000512463)

COVER LETTER

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

SUBJECT:	YDM TRANSPORTATION SERVICE CORP				
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
T 1 1					
Enclosed are an on	iginal and one (1) copy of the arti	cles of incorporation and	a check for:		
☎ S70.00 Filing Fee	☐ S78.75 Filing Fee & Certificate of Status	☐ S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of		
		ADDITIONAL CO			
FROM: _	Nam	T NAMES: DIAZ MIRA (Printed or typed)	ABAL		
_	125 SW 114TH AVE APT 6 Address				
	MIAMI, FLORIDA 33174				
_	City, 786-915-2276	State & Zip			
-	Daytime T YORDANYDIAZ05@GMAIL	elephone number			
	E-mail address: (to be used	for future annual report r	notification)		

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

(H220000512463)

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

me of the carpo				
CLE II PRE	VCIPAL OFFICE Principal street address	Mailing add	race if the florence in	
SW 114TH	AVE APT 6	-	Mailing address, if different is: 125 SW 114TH AVE APT 6	
MI ELOPID	A 22474			
	A 33174	MIAMI, FLORIDA	33174	
TETT PURA rpose for which	POSE the corporation is organized is:			
	AWEIII BURINESS			
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	-		· · ·	
TEIV SH-11 nber of shares o	RES f stock is: 100			
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Name a	nd Title:	Name and Title:	H22000	05/246-
Addres	s	Address:		
				
ARTICLE VI	REGISTERED AGENT			
The name and F	lorida street address (P.O. Box NOT ac	ceptable) of the registered agent	is:	
Name:	Jordany Dig	Z IVIIraloa I		
Address:	125 SW 114MA	AD+ 1		
	Miami, FL 33	3174		
ARTICLE YII	<u>INCORPORATOR</u>			
The name and ac	Idress of the Incorporator is:	1		
Name:	Yordania Diaz	Micabal	Į,	2022
	125 CIN WITH	Nim Anti	רן א רו	. الله ب≒
Address:	122 300 117	HVE THE	Ŧí A:	
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ARTICLE VIII	EFFECTIVE DATE:	2/21/2	FLC	AN IZ:
(If an effective d	other than the date of filing:	and cannot be more than five	ONAL)	<u>າ</u> ູັ ທ ູ
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the document's ef	fective date on the Department of State'	s records.	cinents, this date w	ili not be listed as
Having been ween		_		
certificate, I am fa	ed as registered agent to accept service of miliar with and accept the appointment	f process for the above stated cor as registered agent and naves to	poration at the place	e designated in this
(m) = 1	7		Single Control	7 2000
(h) (j)	Applied Simon / Builder 1 to		OU	10/2022
	Required Signature/Registered A	_		Date
I submit this docu document to the D	iment and affirm that the facts stated h tepartment of State constitutes a third de	erein are true. I am aware that	t the false informati	ion submitted in a
6	The constitutes a third de	gree jewny us provinca jor in & b	и л 155, F.S. Дод Тог	010000
Required Signature	Incorporator	 	(1210)	3/2022
Serimen Signatur	é menthotatot		Date	
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