

**P22000021020**

## Florida Department of State

## Division of Corporations

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## To:

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

## From:

Account Name : KOTCHILTH VALDIVIA  
Account Number : I20220000026  
Phone : (305)332-1478  
Fax Number : (305)456-4563

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

Email Address:

AAWCPS@yahoo.com

## FLORIDA PROFIT/NON PROFIT CORPORATION

## MENDOZA COOLING EXPRESS CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

HL

**COVER LETTER**

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

**SUBJECT:** MENDOZA COOLING EXPRESS CORP  
(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:** FIDEL MENDOZA FERREIRO  
Name (Printed or typed)

11287 SW 161 PL  
Address

MIAMI, FL 33196  
City, State & Zip

786-403-6354  
Daytime Telephone number

FIDELMENDOZAFERREIRO@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

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

**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: MENDOZA COOLING EXPRESS CORP**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

11287 SW 161 PL11287 SW 161 PLMIAMI, FL 33196MIAMI, FL 33196**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: FIDEL MENDOZA FERREIRO - PAddress 11287 SW 161 PL

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

MIAMI, FL 33196

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

FILED  
2022 MAR 18 AM 11:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: FIDEL MENDOZA FERREIRO  
Address: 11287 SW 161 PL  
MIAMI, FL 33196

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: FIDEL MENDOZA FERREIRO  
Address: 11287 SW 161 PL  
MIAMI, FL 33196

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 MAR 18 AM 11:32

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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 100 (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

03/18/2022  
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.*

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

03/18/2022  
Date