Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : XOTCHILTH VALDIVIA

Account Number : 120220000026 Phone : (305)332-1478 Fax Number : (305)456-4563

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## FLORIDA PROFIT/NON PROFIT CORPORATION VARADERO FREIGHT SYSTEM CORP

Certificate of Status	0
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## **COVER LETTER**

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

SUBJECT:	VARADERO FREIGHT		
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
⊠ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM:		LUIS GONZALEZ e (Printed or typed)	
	4400 W	16TH AVENUE APT 630 Address	
		EAH, FL 33012 , State & Zip	
_		4–241-5599 Telephone number	
		A3113@GMAIL.COM	
<del></del>	E-mail address: (to be us	ed 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 corporati	on shall be: VARADERO FREIGHT	SYSTEM CORP	
ARTICLE II PRINCI			ess, if different is:
4400 W 16TH AVEN	UE APT 630	4400 W 16TH	AVENUE APT 630
HIALEAH, FL 33012		HIALEAH, FL	33012
ARTICLE III PURPO The purpose for which th	SE ne corporation is organized is: ANY A	ND ALL LAWFUL BUSINESS	
			2028
			HAR 18
ARTICLE IV SHARE The number of shares of	stock is: 100		AMII: 31 OF STATE E. FLORIDA
-	LOFFICERS AND/OR DIRECTORS  JOSE LUIS GONZALEZ - PRESIDE	NT Name and Title:	
Address	4400 W 16TH AVENUE APT 530	Address:	
	HIALEAH, FL 33012		
N		Name and Title:	
Name and Title:			
Address			
Name and Title			
Address		Address:	

Name and Title	:	Name and Title:		··-	
Address		Address:		••	<del></del>
ARTICLE VI_ REGIS	STERED AGENT	ea e e e e e e e e e e e e e e e e e e			
The name and Florida:	street address (P.O. Box NOT acceptable) of	the registered agent is:			
Name:	JOSE LUIS GONZALEZ	-			
Address:	4400 W 16TH AVENUE APT 630	_	_	_	
	HIALEAH, FL 33012	_	SEL ALL	202 <b>2</b>	
			A 문	MA	<u>.i.</u>
ARTICLE VII INCO	RPORATOR		SEURÉ IARY I ALLAHASSEE	202 <b>2 H</b> AR 18	
The name and address	of the Incorporator is:		E. 6	<b>&gt;</b>	П
Name: _	JOSE LUIS GONZALEZ	_	- S [.	AM 11: 3	
Address:	4400 W 16TH AVENUE APT 630	_	OF STATE EE. FLORIDA	<u>:</u> <u>သ</u>	
-	HIALEAH, FL 33012	_			
(If an effective date is filing.)  Note: If the date insert	than the date of filing: 03/18/2022 listed, the date must be specific and cannot ted in this block does not meet the applicable we date on the Department of State's records.	ot be more than five days prior of the statutory filing requirements, this			
Having been named as certificate, I am familia	registered agent to accept service of process jur with and accept the appointment as registe	for the above stated corporation at a red agent and agree to act in this c	apacity		l in this
	7	<del></del>		V2022	
I submit this documen document to the Depar	Required Signature/Registered Agent ut and affirm that the facts stated herein are timent of State constitutes a third degree felor	e true. I am aware that the false in as provided for in s.817.155, F.S	S.	submit	ted in c
Required Signature/Inc	cornorator	Date -	03/16	3/2022	
reduier pignamo.	7				