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From:

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Account Number : I20180000033 : (305)805-3516 Fax Number : (305)887-5844

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FLORIDA PROFIT/NON PROFIT CORPORATION MH TRUCK TRANS INC

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COVER LETTER

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SUBJECT:	MH TRUCK TRAN	IS INC TENAME - MUST INCL	UDE SUFFIX)
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linclosed are an ong	ginal and one (1) copy of the art	icles of incorporation and	1 a check for:
\$\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	& Certificate of
		ADDITIONAL CO	Status DEV RECHURED
FROM:	Nam	e (Printed or typed)	
1	9840 NW 81ST P	, , ,	٠
	 ·	Address	
N	MAMI, FL 33015		
	•	, State & Zip	
3	05-299-4536		
	•	Celephone number	
ħ.	MARIOBACALLAC	_	
	E-mail address: (to be use	d for future annual report i	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)

LEII PRIN	CIPAL OFFICE Principal street address	Muifi	Mulfing address, if different is:	
40 NW	B1ST PL	19840 N	W 81ST PL	
MI, FL		MIAMI, FL 33015		
LE III PIJRP	OSE the corporation is organized is:			
TANDA	ALL LAWFUL BUSINE		· 	
			···· <u>··</u> ··	
		<u> </u>		
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Аив5. 2022 11:47АМ		H 22 No.	14982 P. 452
Name and Title:			· = v / ·
Address	Address;		
			
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT accept Marine: Address: Address: Address: ACCOMMENT AGENT ACCOMMENT ACCOMMENT AGENT ACCOMMENT AGENT ACCOMMENT ACCOMMENT AGENT ACCOMMENT ACCOMMENT AGENT ACCOMMENT ACCOMMENT ACCOMMENT ACC	ptable) of the registered agent is:		
ARTICLE VII INCORPORATOR			
The name and address of the Incorporator is: Name: Address: MATIO TEVNANCE Address:	162 1. PC XVIS		5085 VII.
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific an filing.)	(OPTIO		days after the 2?
Note: If the date inserted in this block does not meet the apthe document's effective date on the Department of State's			will not be listed as
Having been named as registered agent to accept service of pectificate, I am familiar with and accept the appointment as			
XXX		8)	5/22
Required Signature/Registered Ag	gent		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 \$.817.155, F.S.

Required Signature/Incorporator