

P22000077620

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : THREE K FAST CARRIER SERVICES INC
Account Number : I20180000033
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:

Fernando171164@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION

FCL TRUCK SERVICE INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

H220003472403

COVER LETTER

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

SUBJECT: FCL TRUCK SERVICE INC(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
Filing Fee☐ \$78.75
Filing Fee
& Certificate of Status☐ \$78.75
Filing Fee
& Certified Copy☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: First Name: FERNANDO
(2) Last Names: CASTRO LOPEZ

Name (Printed or typed)

2500 W 56th ST APT 1101

Address

HIALEAH, FL 33016

City, State & Zip

786-337-1315

Daytime Telephone number

FERNANDO171164@GMAIL.COM

E-mail address: (to be used for future annual report notification)

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

Oct. 10. 2022 12:25PM

H/2 No. 27517/P. 3/63

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: FCL TRUCK SERVICE INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

2500 W 56th ST APT 1101

HIALEAH, FL 33016

Mailing address, if different is:

2500 W 56th ST APT 1101

HIALEAH, FL 33016

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: Fernando Castro Lopez, Pres Name and Title: _____

Address 2500 W 56th St, Apt 1101 Address: _____

Hialeah, FL 33016

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

9/25/2022 10:01:51

Oct. 10. 2022 12:26PM

H No. 27510P. 414763

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: Fernando Castro Lopez

Address: 2500 W. 56th St, Apt 1101
Hialeah, FL 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Fernando Castro Lopez

Address: 2500 W. 56th St, Apt 1101
Hialeah, FL 33016

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/10/22 (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

(X)

[Signature]

Required Signature/Registered Agent

10/10/2022
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.

(X)

[Signature]

Required Signature/Incorporator

10/10/2022
Date