

P24000017903

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 : 120180000033
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: IGNACIO.CALIXTE@GMAIL.COM

FLORIDA PROFIT/NON PROFIT CORPORATION
ISRA SERVICES CORP

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

Mar. 12. 2024 11:52AM

COVER LETTER

No. 0430-8P. 23
112400005823

Department of State
New Filing Section
Division of Corporations
P. O. Box 6527
Tallahassee, FL 32314

SUBJECT: ISRA SERVICES 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
Filing Fee

☐ \$75.75
Filing Fee
& Certificate of Status

☐ \$75.75
Filing Fee
& Certified Copy

☐ \$81.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Ignacio Calixte
Name (Printed or typed)

9022 NW 23RD ST
Address

Coral Springs, FL 33065
City, State & Zip

954-937-3012
Daytime Telephone number

Ignacio.Calixte@gmail.com
E-mail address (to be used for future annual report notification)

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

Mar. 12. 2024 11:52AM

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 601, F.S. (Part for

#No. 8430267, 38303

ARTICLE I NAME

The name of the corporation shall be: ISRA Services Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2375 NE 173 RD ST
APT 3102

North MIAMI BEACH, FL 33160

Mailing address, if different is:

2375 NE 173 RD ST
APT 3102

North MIAMI BEACH, FL 33160

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: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Eduardo Roman (P) Name and Title: _____

Address: 2375 NE 173 RD ST Address: _____

APT 3102

North MIAMI BEACH, FL 33160

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Mar 12, 2024 11:53AM

#No. 6430047 5830 E

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: EDUARDO Roman

Address: 2375 NE 173RD ST APT B102
North MIAMI BEACH FL 33160

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: EDUARDO ROMAN

Address: 2375 NE 173RD ST APT B102
North MIAMI BEACH FL 33160

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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 requirement, the date will not be used for 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 in the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

[Signature]
Registered Agent

03/12/2024
Date

I executed this document and affirm that the facts stated herein are true. I am aware that the false information submitted to the Department of State constitutes a third degree felony as provided for in s.817.355, F.S.

[Signature]
Required Signature of Incorporator

03/12/2024
Date

2024

13:00