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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.

FLORIDA PROFIT/NON PROFIT CORPORATION MEDINAS TRANSPORT SERVICES INC

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#24000/14/263

COVER LETTER

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

SUBJECT: MEDINAS TRANSPORT SERVICES INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUPPLX)

Enclosed are an original and one (1) copy of the art	icles of incorporation an	d a check for:
Filing Fee Filing Fee & Certificate of Status	578.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
First Name: GUIL FROM: (2) Last Names: M		NA NIDEZ
	(Printed or typed)	NANDEL
11201 SW 55TH S		
MIRAMAR, FL	Address 33029	
City,	State & Zip	
786-563-6512		
Daytime To	elephone number	
MEDINAGUILL E-mail address: (to be used	E78@GMAII for future annual report to	COM otification)
i e e e e e e e e e e e e e e e e e e e		

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

H24000/14D263

ARTICLES OF INCORPORATION in compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE II PRIN	CIPAL OFFICE Principal street address	М	failing address, if different is:
1201 SW 551	H STREET BOX 467	11201 S	W 55TH STREET BOX 46
MIRAMAR,	FL 33029	MIRAN	AR, FL 33029
TICLE III PURP	OSE the corporation is organized is:		
	L LAWFUL BUSINESS		
			
		· · · · · · · · · · · · · · · · · · ·	
			
TICLE IV SHAR	ES 100		
number of shares of	stock is: 100		
			
TICLE V INITIL	L OFFICERS AND/OR DIRECTORS (P) Guillermo Medina Hern	andez	
	<u>L OFFICERS AND/OR DIRECTORS</u> (P) Guillermo Medina Hern	Name and Title:	
Name and Title	(P) Guillermo Medina Hern 11201 SW 55th ST box 467	Name and Title:	
Name and Title	<u>L OFFICERS AND/OR DIRECTORS</u> (P) Guillermo Medina Hern	Name and Title:	
Name and Title	(P) Guillermo Medina Hern 11201 SW 55th ST box 467 MIRAMAR, FL 33029	Name and Title: Address:	
Name and Title	(P) Guillermo Medina Hern 11201 SW 55th ST box 467 MIRAMAR, FL 33029	Name and Title: Address: Name and Title:	
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H24000/14026

	and Title:				
Addn	TSS	Address:			
					
ICLE VI	REGISTERED AGENT Fibrida street address (P.O. Box NOT acceptable)) of the registered agent is:			
ne:	GUILLERMO MEDINA HERNAN				
ress;	11201 SW 55TH ST BOX 467				
	MIRAMAR, FL 33029				
<u>ICLE VII</u>	INCORPORATOR				
bgs smar	address of the Incorporator is:				
ame:	GUILLERMO MEDINA HERNAN	<u>DE</u> Z			
	33463 6341 54554 644 644				
Address:	11201 SW 55TH ST BOX 467				
	MIRAMAR, FL 33029				
CICLE VIII ctive date, in effective 5.)	MIRAMAR, FL 33029 LEFFECTIVE DATE: if other than the date of filing: 03-27-2024 ate is listed, the date must be specific and care ate inserted in this block does not meet the applical	not be more than five da	ys prior		
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