

P24 000027100

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000146595 3)))



H240001465953ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : NBI FINANCIAL ACCOUNTING & TAX
Account Number : I20180000059
Phone : (786)253-1890
Fax Number : (305)397-1861

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2024 APR 22 AM 8:49

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

G.F.R Mach 3 Fueling Solutions, Inc

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: G.F.R Mach 3 Fueling Solutions, Inc**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

9010 SW 137th Ave. Suite 237Miami, FL 33186**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: All Lawful Business.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: John H Kunkel III - CEOName and Title: Natalia B Izquierdo- CFOAddress: 1120 von phister St.Address: 6966 SW 164 CtKey West, FL 33040Miami, FL 33193Name and Title: Angela Williamson Kunkel- VP

Name and Title: _____

Address: 1120 von phister St.

Address: _____

Key West, FL 33040

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

FILED
2024 APR 22 AM 8:49
CLERK OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: NBI Financial Accounting & Tax Services Inc
Address: 9010 Sw 137th Ave Suite 237
Miami, FL 33186

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: NBI Financial Accounting & Tax Services Inc
Address: 9010 Sw 137th Ave Suite 237
Miami, FL 33186

FILED
2024 APR 22 AM 8:49
TALLAHASSEE, FLORIDA

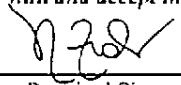
ARTICLE VIII EFFECTIVE DATE:

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 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

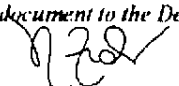


Required Signature/Registered Agent

04/19/2024

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.



Required Signature/Incorporator

04/19/2024

Date