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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:

AlexanderPV1981@gmail.com

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DIVISION OF CORPORATIONS  
COMMERCIAL  
SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION  
CAMIONES PORTILLO INC

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

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Electronic Filing Menu

Corporate Filing Menu

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**COVER LETTER**

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

**SUBJECT: CAMIONES PORTILLO 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

**FROM: First Name: ALEXANDER**  
**(2) Last Names: PORTILLO VALDES**  
Name (Printed or typed)

**4955 NW 199TH ST LOT 8**  
Address

**MIAMI GARDENS, FL 33055**  
City, State & Zip

**786-857-1939**

Daytime Telephone number  
**ALEXANDERP1981@GMAIL.COM**

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

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

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STATE

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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: **CAMIONES PORTILLO INC**

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

**4955 NW 199TH ST LOT 8**  
**MIAMI GARDENS, FL 33055**

Mailing address, if different is:

**4955 NW 199TH ST LOT 8**  
**MIAMI GARDENS, FL 33055**

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: **(P) ALEXANDER PORTILLO VALDES**

Name and Title: \_\_\_\_\_

Address **4955 NW 199TH ST LOT 8**  
**MIAMI GARDENS, FL 33055**

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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STATE  
FL

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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: ALEXANDER PORTILLO VALDES  
Address: 4955 NW 199TH ST LOT 8  
MIAMI GARDENS, FL 33055

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ALEXANDER PORTILLO VALDES  
Address: 4955 NW 199TH ST LOT 8  
MIAMI GARDENS, FL 33055

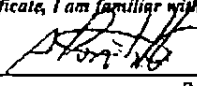
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 05-09-2024 (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.)

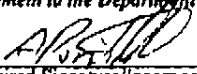
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)   
Required Signature/Registered Agent

05-09-2024  
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.

(X)   
Required Signature/Incorporator

05-09-2024  
Date

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STATE  
OF FLORIDA  
CLERK