

P2400038469

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

Email Address: AMAURYPUERTAS.SANCHEZ@yahoo.com

FLORIDA PROFIT/NON PROFIT CORPORATION
AMAURY PUERTAS TRUCK INC

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

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COVER LETTER

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

SUBJECT: AMAURY PUERTAS TRUCK 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: AMAURY
(2) Last Names: PUERTAS SANCHEZ
Name (Printed or typed)
1950 SW 122ND AVE
Address
MIAMI, FL 33175
City, State & Zip
786-260-4810
Daytime Telephone number
AMAURYPUERTASANCHEZ@YAHOO.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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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: AMAURY PUERTAS TRUCK INC

ARTICLE II PRINCIPAL OFFICE
Principal street address: 1950 SW 122ND AVE APT 313
MIAMI, FL 33175
Mailing address, if different is: 1950 SW 122ND AVE APT 313
MIAMI, FL 33175

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:	<u>(P) AMAURY PUERTAS SANCHEZ</u>	Name and Title:	_____
Address	<u>1950 SW 122ND AVE APT 313</u> <u>MIAMI, FL 33175</u>	Address:	_____
Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____

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Handwritten: H24 001914/43

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: AMAURY PUERTAS SANCHEZ
Address: 1950 SW 122ND AVE APT 313
MIAMI, FL 33175

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: AMAURY PUERTAS SANCHEZ
Address: 1950 SW 122ND AVE APT 313
MIAMI, FL 33175

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F.M.S.P.

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 06-05-2024 (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

[Signature] 06-05-2024
Required Signature/Registered Agent 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.

[Signature] 06-05-2024
Required Signature/Incorporator Date