Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION TRUSTED TRANSPORT OF SOUTH FLORIDA CORP.

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Corporate Filing Menu

Help



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

ARTICLE I NAME. The name of the corpora	tion shall be: TRUSTED TRANSPOR	T OF SOUT	H FLORIDA CORP.	
ARTICLE II PRING 2131 NE 168th STREE NORTH MIAMI BEACH	CIPAL OFFICE Principal street address TAPT 3 I, FL 33162	2131 N	Mailing address, if different is: E 168th STREET APT 3 MIAMI BEACH, FL 33162	
4RTICLE III PURPO The purpose for which t	OSE the corporation is organized is: ANY AND	ALL LAWFUL	BUSINESS	
				· ·
				· · ·
ARTICLE V INITIA	ES Stock is: SHARES: 100 @ \$1.00 LOFFICERS AND/OR DIRECTORS SUJOSE LIONEL GONZALES - P			
Name and Title	2131 NE 168th STREET APT 3 NORTH MIAMI BEACH, FL 331	Address:		
	NONTH WHAIVII BEACH, FE 331	02		
Name and Title:			:	
roures		Tradicis,		
Address		Address:		
			,	

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From, Yanet Avila

Name and	d Title:	Name and Title:
Address		Address:
		
	REGISTERED AGENT	
Name:	o <mark>rida street address</mark> (P.O. Box NOT acceptable) of JOSE LIONEL GONZALES	the registered agent is:
Address:	2131 NE 168th STREET APT 3	
Augress:	NORTH MIAMI BEACH, FL 33162	
	·····	
ARTICLE VII	NCORPORATOR	· -:
The name and ad	dress of the Incorporator is:	
Name:	JOSE LIONEL GONZALES	
Address:	2131 NE 168th STREET APT 3	
	NORTH MIAMI BEACH, FL 3316	2
	EFFECTIVE DATE:	
Effective date, if of (If an effective date)	other than the date of filing: nte is listed, the date must be specific and canno	. (OPTIONAL) be more than five days prior or 90 days after the
Note: If the date the document's ef	inserted in this block does not meet the applicable fective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
	ed as registered agont to accept service of process fo miliar with and accept the appointment as register	r the above stated corporation at the place designated in this d agent and agree to act in this capacity
Here and Part Home	16 g 7 D C)	
	Required Signature/Registered Agent	Date
	iment and affirm that the facts stated herein are i epartment of State constitutes a third degree felony	rue. I am aware that the fulse information submitted in a as provided for in v.817.155, F.S.
production (1) (Jun) (, 20)		no proceedings of the control of the
Required Signatur		Date