Point Department of State 43029 Devision of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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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.

Email Address: Marcovolos Oblagmaile

FLORIDA PROFIT/NON PROFIT CORPORATION VELOSO TRUCKING INC

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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

	(PROPOSED CORPOR	CIE NAME - <u>MOOT GAGE</u>	<u> </u>
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	i a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fec & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status

VELOSO TRUCKING INC

First Name: MARCOS

FROM: (2) Last NameS: VELOSO PENA
Name (Printed or typed)

30 SW 1ST ST APT 2201
Address

MIAMI, FL 33130

City, State & Zip

786-296-3685

Daytime Telephone number

MARCOVELOSO611@GMAIL.COM

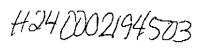
ADDITIONAL COPY REQUIRED

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

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

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

The name of the	corporation shall be: VELOSO TR	UCKING INC	_
ARTICLE II	PRINCIPAL OFFICE Principal street address	Mailing address, if different is:	
30 SW	1ST ST APT 2201	30 SW 1ST ST APT	2201
MIAMI,	FL 33130	MIAMI, FL 33130	
	PURPOSE r which the corporation is organized is: ND ALL LAWFUL BUSIN		
ARTICLE IV The number of s	shares of stock is: 100		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS		: : က
		Name and Title:	• •
Address	30 SW 1st ST APT 220		
	MIAMI, FL 33130		
Name and Tit	(VP) Jose A. Veloso	Name and Title:	
Address	30 SW 1st ST APT 220	Address:	
	MIAMI, FL 33130		
Name and Tit	tle:	Name and Title:	
Address			



Name and Title:	Name and Title:	
Address	Address:	
ARTICLE VI REGISTERED AGENT		
	O. Box NOT acceptable) of the registered agent is:	
	<u>VELOSO PE</u> NA	
Address: 30 SW 157	T ST APT 2201	
MIAMI, FL	33130	
		*· 3
ARTICLE VII INCORPORATOR		- 1
	- i	(=
The name and address of the Incorporator		• • • • • • • • • • • • • • • • •
	VELOSO PENA	
(total was	ST ST APT 2201	: -:
MIAMI, FI	∟ 33130	$\ddot{\varpi}$
		প্র
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of fil (If an effective date is listed, the date of filing.)	ling: 06-25-2024 (OPTIONA nost be specific and cannot be more than five days	
Note: If the date inserted in this block do the document's effective date on the Dep	oes not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as
Having been named as registered agent to certificate, I am familiar with and accept	o accept service of process for the above stated corport the appointment as registered agent and agree to act	ation at the place designated in this in this capacity
() mereo	_	<u>06-25-2024</u>
•	ature/Registered Agem	Date
I submit this document and affirm that document to the Department of State con	the facts stated herein are true. I am aware that the stitutes a third degree felony as provided for in 5.817.	e false information submitted in a 155, F.S.
(2) mercor		06-25-2024
Required Signature/Incorporator		Date