

## Florida Department of State

## Division of Corporations

## Business Entity 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.

(((H240003153913)))

PL  
9-17-24

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

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

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

2024 SEP 16 PM 4:05  
FLORIDA  
DEPARTMENT OF STATE  
TALLAHASSEE, FL

**FLORIDA PROFIT/NON PROFIT CORPORATION  
CARGO VAN ERCIA SERVICES INC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

RECEIVED

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SECRETARY OF STATE  
TALLAHASSEE, FL

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Help

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:

CARGO VAN ERCIA SERVICES INC

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

5077 NW 7 ST APT 4-405

MIAMI FL 33126

**ARTICLE III SHARES:** The number of shares of stock is: 100 SHARES@10**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

LORENA PUYOL CASTILLO (PRESIDENT)

RAYDELL ERCIA RODRIGUEZ (VICE-PRESIDENT)

RENIER ERCIA RODRIGUEZ (SECRETARY)

2014 SEP 16 PM 4:05  
FL**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

LORENA PUYOL CASTILLO

5077 NW 7 ST APT 4-405

MIAMI FL 33126

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

LORENA PUYOL CASTILLO

5077 NW 7 ST APT 4-405

MIAMI FL 33126

**Required Signatures:**

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

LORNA PUGOL C

Registered Agent

09/13/2024

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.

LORNA PUGOL C

Incorporator

09/13/2024

Date

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TALLAHASSEE, FL