## P 1100 0017074

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## **COVER LETTER**

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

SUBJECT: Green Carriers, Inc.			
(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)	<del></del>
Enclosed are an original and one (1) copy of the article	cles of incorporation an	d a check for:	
\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
		······································	
FROM: Green Carriers, Inc.			<b>્</b>
Name	(Printed or typed)	TA TECK	
9931 Old Lakeland Hwy		ZUITEB I	
	Address		-
Dade City, FL 33525 City,	State & Zip	AM II: 39	J
813-312-3105			
Daytime To	elephone number		
greenacres pas E-mail address: (to be used	tor future annual report	notification)	

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

## ARTICLES OF INCORPORATION

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

	corporation shall be:	•	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing a	address, if different is:
	9931 Old Lakeland Hwy.		
	Dade City, FL 33525		
A DOTOL D VII	DIMPOGR		
ARTICLE III	which the corporation is organized is:		
Transporta			
ARTICLE IV	SHARES		
The number of s	shares of stock is:100		
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	TORS	
	Title:Jesse J Green, P.VP.S.T		
Address:	9931 Old Lakeland Hwy.		
	Dade City, FL 33525		
Nome and	(Tister	Name and Title	
Address:	Title:	Name and Title:	
Address:			·
	Title:		
Address:		Address:	
			≥ <b>&gt;</b>
		<del></del>	
ARTICLE VI	REGISTERED AGENT		58 =
	Florida street address (P.O. Box NOT acceptab	ole) of the registered agent is:	AAAA AAAAA TI
Name:	Jesse J Green, P.VP.S.T		S
Address:	9931 Old Lakeland Hwy.		
	Dade City, FL 33525		THE PARTY OF THE P
	•		
	INCORPORATOR		
	address of the Incorporator is:		္တုိ မွ
Name:	Jesse J Green, P, VP, S, T		•
Address:	9931 Old Lakeland Hwy Dade City, FL 33525	, , , , , , , , , , , , , , , , , , ,	
	Dade Oily, I'L OSSES	<del></del>	
	amed as registered agent to accept service of p		
this certificate, l	l am familigr with and accept the appointment a	as registered agent and agree to	act in this capacity
	1/1/1/m		2/14/11
	Required Signature/Registered Agen	t	Date
/ I cubmit thic do	ocument and affirm that the facts stated herei	n are true I am aware that the	e false information submitted in
	e Department of State constitutes a third degree		
	Department of State Constitutes a mira acgree	, ,	ŕ
	I sal our	,,	2/14/11