

TRANSMITTAL LETTER

P99000065280

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

SUBJECT: CRAIG and SONS, INC.
(Proposed corporate name - must include suffix)

100002933651--7

-07/16/99--01087--004

*****87.50 *****87.50

Enclosed is 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: DAVID E. CRAIG
Name (Printed or typed)

514 Dorset Circle
Address

South Daytona, FL 32119
City, State & Zip

904-527-9669
Daytime Telephone number

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

C. GALLMON-CASE

JUL 23 1999

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

Article I Name

The name of the Corporation shall be:

Craig and Sons Trucking, Inc.

Article II Principal Office

The principal place of business and mailing address of this corporation shall be:

514 Dorset Circle
South Daytona, FL 32119

Article III Shares

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares

Article IV Initial Registered Agent and Street Address

The name and Florida street addresses of the initial registered agent are:

David E. Craig
514 Dorset Circle
South Daytona, FL 32119

Article V Incorporator

The name and address of the incorporator to these Articles of Incorporation are:

David E. Craig
514 Dorset Circle
South Daytona, FL 32119


Signature/Incorporator

7-11-99

Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature/Registered Agent

7-11-99

Date

FILED
99 JUL 16 AM 8:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA