## F01000005445

TO D		• •
TO: Registration Section		
Division of Corporations		
-	700	0046391978
SUBJECT: J.W.B. 5 TKG	20 Kin Co	-10/17/0101022003
(Name of cor	poration - must include suffix)	*****78.75 *****78.75
(1,4410 0) 001	potation - must include surfix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporati	on for Authorization to Transcet	Desired Street
"Certificate of Existence", and check are submitted to transact business in Florida	ted to register the character	Business in Florida",
to transact business in Florida.	ted to register the above reference	ed foreign corporation
to Builder business in Figure 1.		• *
Please return all correspondence companies at the		
Please return all correspondence concerning this	matter to the following:	
AWDIE, Keish		
THE THE THE	ame of Person)	
Awbeen Keith	ame of Person)	
J-W.B. S TRUCKING		_
- W.D. J TEUCHING		
(Fir	m/Company)	
3900 MAIL! 11	-	
JOUS MICHN AVE		
3205 MALLIN AUC	(Address)	
<u>TAMPA FL 33411</u> (City/s	,	
- 1.1.1P# PL 33411	<u> </u>	
City/S	State and Zip code)	
For further information concerning this matter, ple	ease call:	
		7.7. 0
10.040		
HNDLEW Keith at (8)	13 390 - 0910 Area Code & Daytime Telephone	AR 9
(Name of Person)	Area Code & Daytime Telephone	Number = T
·	and the buy mile receptione	
		H <sub>0</sub> m
STREET ADDRESS:	MAILING ADDRESS:	10 T ST
Registration Section		2: 01 TATE ORIDA
Division of Corporations	Registration Section	Fin 9
409 E. Gaines St.	Division of Corporations	•
Tallahassee, FL 32399	P.O. Box 6327	4.0
	Tallahassee, FL 32314	4nh
Enclosed is a check for the fall		
Enclosed is a check for the following amount:		mh 10/18
☐ \$70.00 Filing Fee	<b>-</b>	10118
, , , , , , , , , , , , , , , , , , ,	☐ \$78.75 Filing Fee & ☐	\$87.50 Filing Fee,
Certificate of Status	Certified Copy	Certificate of Status &
		Certified Copy
		A #

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. J.W.B.'S TEUCKING	• •	
(Name of corporation; must include the word "INCORPOR words or abbreviations of like import in language as will cle natural person or partnership if not so contained in the name	early indicate that it is a corporation instead of a	
2. Del Aw ALC (State or country under the law of which it is incorporated)	3. 31-1804018	
	(FEI number, if applicable)	
4	5. relpetual	
6. <u>f0-4-01</u>		
7. 3205 MALLIN AUC TI	AMPA Pl. 33611	
(Principal office a	ddress)	
3205 MALLIN Ave T	Anea 01. 336/1	
7. 3205 MALL'N AVE TO (Principal office a  3205 MALL'N AVE TO (Current mailing a	ddress)	
8. Twcling		
(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)	
9. Name and street address of Florida registered agent	t: (P.O. Box or Mail Dron Box NOT acceptable)	
Name: ANDREW Keith	T Q	
Office Address: 3205 MALLIN AWC	FIL TARY ASSET	
TAMPA (City)		
10. Registered agent's acceptance: Having been named as registered agent and to accept ser		
	VICE OF BEACESS for the above stated componetion at the m	

designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/of directors.	
A. DIRECTORS	
. Chairman:	<del></del> _
Address:	
-Vice Chairman:	
Address:	
Director:	. *
Address:	
Director:	
Address:	
B. OFFICERS	
President: ANDREW Keith	
President: According to the state of the sta	<u>-</u>
Address: <u>9205 MALLIN AVE</u>	ALL)
TAMPA CL 33611	
Vice President:	- SP
Address:	- To a - D
	TATE ORIGINAL PROPERTY OF THE
Secretary:	>" <u>=</u>
Address:	
Treasurer:	11. 31. 31. 31. 31. 31. 31. 31. 31. 31.
Address:	:
NOTE: If necessary, you may attach an addendum to the application listing additional off	icers and/or directors.
	•
(Signature of Chairman, Vice Chairman, or any officer listed in number 12	of the application)
14. ANDERN Keith /	
(Typed or printed name and capacity of person signing application	.)

## State of Delaware

PAGE 3

## Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "J.W.B'S TRUCKING INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF OCTOBER, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "J. VERS SO THE TRUCKING INC." WAS INCORPORATED ON THE THIRD DAY OF OCTOBER INC. " WAS INCORPORATED ON THE THIRD DAY OF OCTOBER INC." A.D. 2001.

Warriet Smith Windson Secretary of State

3441939 8300

AUTHENTICATION: 1376016

010494848

DATE: 10-04-01