# 1300005428

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

1112 1/284



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12/05/13--01015--020 \*\*87.50



mD 2/18

#### **COVER LETTER**

TO: New Filing Section Division of Corporations			
SUBJECT: Superior Hauling	& Fast Trai	nsit, Inc. dba Redt	oird Carriers
Substici.		- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign ("Certificate of Existence," or "Certificate above referenced foreign corporation to	ite of Good Star	nding" and check are sub	
Please return all correspondence concer	ming this matte	r to the following:	
Jennifer Hayes			
	Name of	Person	
Superior Hauling & Fa	ist Trans	it, Inc. dba Re	dbird Carriers
	Firm/Con	npany	
P.O. Box 78401			
	Addr	ess	
Saint Louis, MO 63	178		
	City/State a	nd Zip code	
jchayes@redbirdcarrie	ers.com		
E-mail addre	ss: (to be used	for future annual report n	notification)
For further information concerning this	matter, please	call:	
Jannifor Hoyaa	244	604 7700	
Jennifer Hayes	_ at (314	621-7780	X 1 1 3
Name of Person	Area	Code & Daytime Telepho	one Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following ar	nount:		
□ \$70.00 Filing Fee □ \$78.75 Fili Certificate	<u> </u>	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &



December 6, 2013

JENNIFER HAYES P.O. BOX 78401 ST.LOUIS, MO 63178

SUBJECT: SUPERIOR HAULING & FAST TRANSIT, INC, DBA REDBIRD

**CARRIERS** 

Ref. Number: W13000066884

We have received your document for SUPERIOR HAULING & FAST TRANSIT, INC, DBA REDBIRD CARRIERS and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey Regulatory Specialist II

Letter Number: 813A00027854

www.sunbiz.org

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOR	REIGN CORPORATION TO TRANS	SACT B	USINESS IN THE STATE OF FLO	ORIDA:
1. SUPER	TOR HAVLING AN.  orporation; must include "INCORPORA  orporation" ""Co." or "Corp.")	D F	AST TRANSIT, IN	<b>心意 号</b> 点
(Enter name of ec "Inc.," "Co.," "Co	orporation; must include "INCORPOR orp," "Inc," "Co," or "Corp.")	ATED,"	"COMPANY," "CORPORATION,"	17 PH 2:
(If name unavaila	ble in Florida, enter alternate corporate	e name a	dopted for the purpose of transacting b	ousiness in [dorida]
2. MISSOU (State or country)	/C/ under the law of which it is incorporate	3	43-135 7087 (FEI number, if applica	able)
(Date	-1905 of incorporation)	3	(Duration: Year corp. will cease to ex	cist or "perpetual")
6.				
	(SEE SECTIONS 607.1501 &	607.150	Florida, if prior to registration) 02, F.S., to determine penalty liability)	_
7. /30/	WHARF STREET (Principal off		SAINT LOUIS, N	10 63104
	(Principal off	ice addre	ess)	
	(Current maili	ing addro	288)	
8. TRVay	116-			
(Purpose(s)	of corporation authorized in home sta	te or cou	intry to be carried out in state of Florid	la)
	t address of Florida registered agen	•	·	
Name:	MARK BELEN		<u></u>	
Office Address:	MARK BELEN 7709 NEW KING	6-5 K	LOAD	
	JACKSON VILLE (City)		, Florida <u>32219</u>	
	(City)		(Zip code)	
designated in this further agree to co	ent's acceptance: ed as registered agent and to accep application, I hereby accept the ap omply with the provisions of all sta amiliar with and accept the obligat	ppoint <mark>m</mark> ututes re	ent as registered agent and agree clative to the proper and complete	to act in this capacity. I
	Many (Registered ag	uent's sio	nature)	
	(Negatite ag	,cin a aig		

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/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
in the second of
Director:
Address:
Director:
Address:
B. OFFICERS  President: MARU E - BEVEN
Address: 1301 WHARF STREET
SANT LOUIS, NO 63104
Vice President: SENNIFER C. HAYES
Address: 1301 WHARF STREET
5AINT COUIS, NO 63104
Secretary: DEBORAH D. BELEW
Address: 1301 WHARF STREET SAINT LOVIS, NO 63104
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13 M -MM
Signature of Director or Officer
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.
14. MARK E. BELEV PRESIDENT  (Typed or printed name and capacity of person signing application)
(Typed or printed name and capacity of person signing application)

## STATE OF MISSOURI



Jason Kander Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

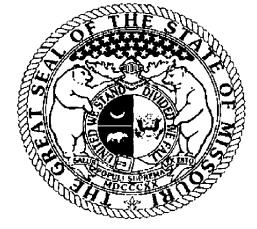
I, JASON KANDER, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

#### SUPERIOR HAULING AND FAST TRANSIT, INC. 00272018

was created under the laws of this State on the 15th day of January, 1985, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 2nd day of December, 2013

Secretary of State



Certification Number: 15776955-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp