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Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.
Account Number : I20080000045
Phone : (302) 645-7400
Fax Number : (302) 645-1280

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

Email Address: americana014@gmail.com

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

FOREIGN PROFIT/NONPROFIT CORPORATION

Comanche Transportation Dedicated, Inc.

| | |
|-----------------------|---------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$78.75 |

MAY 16 2018
J. HARRIS

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. Comanche Transportation Dedicated, Inc.
 (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 82-5277222
 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 04/20/2018 5. _____
 (Date of incorporation) (Date of duration, if other than perpetual)
6. No transactions prior to registration
 (Date first transacted business in Florida, if prior to registration)
 (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3011 White Orchid Rd, Kissimmee, FL 34746
 (Principal office address)
- P.O. Box 470805 Kissimmee, FL 34747
 (Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Nancy S Kimmick

Office Address: 3011 White Orchid Rd

Kissimmee 34746
 (City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place 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.

Nancy S Kimmick

(Registered agent's signature)

10. 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.

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 2018 MAY 15 PM 2:08
 TALLAHASSEE FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORSChairman: Nancy S KimmickAddress: 3011 White Orchid Rd, Kissimmee, FL 34746Vice Chairman: Nancy S KimmickAddress: 3011 White Orchid Rd, Kissimmee, FL 34746Director: Nancy S KimmickAddress: 3011 White Orchid Rd, Kissimmee, FL 34746

Director: _____

Address: _____

B. OFFICERSPresident: Nancy S KimmickAddress: 3011 White Orchid Rd, Kissimmee, FL 34746Vice President: Nancy S KimmickAddress: 3011 White Orchid Rd, Kissimmee, FL 34746Secretary: Nancy S KimmickAddress: 3011 White Orchid Rd, Kissimmee, FL 34746Treasurer: Nancy S KimmickAddress: 3011 White Orchid Rd, Kissimmee, FL 34746

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2018 MAY 15 PM 2:08
CLERK OF DISTRICT COURT
JALAHASSIEE FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.12. Nancy S Kimmick

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Nancy S Kimmick, President

(Typed or printed name and capacity of person signing application)

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COMANCHE TRANSPORTATION DEDICATED, 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 FOURTEENTH DAY OF MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COMANCHE TRANSPORTATION DEDICATED, INC." WAS INCORPORATED ON THE TWENTIETH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



6852635 8300

SR# 20183722305

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 202690241

Date: 05-14-18