

F99000001555

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: RON'S TRUCKING, INCORPORATED
(Name of corporation - must include suffix)

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-03/24/93--01019--001
*****70.00 *****70.00

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida",
"Certificate of Existence", and check are submitted to register the above referenced foreign corporation to
transact business in Florida.

Please return all correspondence concerning this matter to the following:

KATHRYN SCHLEGELMILCH
(Name of Person)

RON'S TRUCKING, INC.
(Firm/Company)

2 DOGWOOD TRAIL PLACE
(Address)

Ocala, FL 34472
(City/State/Zip)

FILED
SECRETARY OF STATE
99 MAR 24 AM 10:51

Should you need to call someone concerning this matter, please call:

KATHRYN SCHLEGELMILCH at (352) 687-4671
(Name of Person) (Area Code & Daytime Telephone Number)

ymh
3/24

COURIER ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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. RON'S TRUCKING, INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. NEVADA 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JAN. 17, 1997 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 3 MARCH 1, 1999
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 2 DOGWOOD TRAIL PLACE
Ocala, FL 34472
(Current mailing address)

8. TRUCKING COMPANY
(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: (P.O. Box or Mail Drop Box NOT acceptable)

Name: KATHRYN SCHLEGELMILCH

Office Address: 2 DOGWOOD TRAIL PL
Ocala, Florida, 34472
(Zip code)

10. 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.

Kathryn Schlegelmilch
(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 addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

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A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: KATHRYN SCHLEGELMILCH

Address: 2 DOGWOOD TRAIL PL
Ocala, FL 34472

Vice Chairman: ALICIA OTTEN

Address: 10524 BRIARHURST PL
CHARLOTTE, NC 28227

Director: RDN SCHLEGELMILCH

Address: 2 DOGWOOD TRAIL PL
Ocala, FL 34472

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: KATHRYN SCHLEGELMILCH

Address: 2 DOGWOOD TRAIL PLACE
Ocala, FL 34472

Vice President: ALICIA OTTEN

Address: 10524 BRIARHURST PLACE
CHARLOTTE, NC 28227

Secretary: KATHRYN SCHLEGELMILCH

Address: 2 DOGWOOD TRAIL PL
Ocala, FL 34472

Treasurer: _____

Address: _____

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

13. Kathryn Schlegelmilch
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. KATHRYN SCHLEGELMILCH, PRESIDENT
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **RON'S TRUCKING, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 17, 1997, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on December 15, 1998.

Dean Heller

Secretary of State

By

CM
Certification Clerk



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
DEC 24 AM 10:31