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TRANSMITTAL LETTER

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

100003126171--1
-02/07/00--01118--016
*****78.75 *****78.75

SUBJECT:

STATEWIDE MINI-MOVES, INC.

(Proposed corporate name - must include suffix)

FILED
00 FEB -7 PM 4:34
TALLAHASSEE, FLORIDA
DEPT. OF STATE

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:

KEITH A. VACULA

Name (Printed or typed)

3120 CROSS FOX DR.

Address

MULBERRY, FL 33860

City, State & Zip

863-425-4913

Daytime Telephone number

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

D. BROWN FEB 14 2000

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: STATEWIDE MINI-MOVES INC.

FILED
00 FEB -7 PM 4:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3120 CROSS FOX DR.
MULBERRY, FL. 33860

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

KEITH A. VACULA
3120 CROSS FOX DR.
MULBERRY, FL. 33860

ARTICLE V INCORPORATOR

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

KEITH A. VACULA
3120 CROSS FOX DR.
MULBERRY, FL. 33860

Keith A. Vacula
Signature/Incorporator

1-27-2000

Date

(An additional article must be added if an effective date is requested.)

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

Keith A. Vacula
Signature/Registered Agent

1-27-2000

Date