

TRANSMITTAL LETTER

P000000052118

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

SUBJECT: Brøthers Transport Company
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: -- David Blair
Name (Printed or typed)

7271 Arble drive

Address

Jacksonville, Florida 32210

City, State & Zip

(904) 743-6571

Daytime Telephone number

100003251781--2
-05/22/00--01108--005
*****87.50 *****87.50

RECEIVED
TALLAHASSEE, FLORIDA

00 MAY 22 AM 10:24

FILED

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

C.C.
5-30-00

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Brothers Transport Company

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7961 Normandy Blvd.

PMB# 1

Jacksonville, Florida 32221

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

na

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

na

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

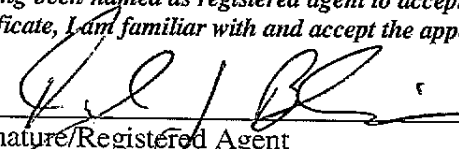
David Blair 7271 Arble Drive
Jax, Fla 32210

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David Blair 7271 Arble Drive
Jax, Fla 32210

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

5/12/00

Date



Signature/Incorporator

5/12/00

Date

FILED
00 MAY 22 AM 10:24
TALLAHASSEE, FLORIDA