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TRANSMITTAL LETTER

FILED

00 SEP -7 PM 2:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: mobile Hitch & Handicap Lifts, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200003385432--2
-09/07/00--01064--007
*****87.50 *****87.50

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: Kibbee Akel
Name (Printed or typed)

7928 Vineyard - Lk Rd N
Address

Jacksonville, FL 32256
City, State & Zip

(904) 349-7862
Daytime Telephone number

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

D. BROWN SEP 1 1 2000

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:

Mobile Hitch + Handicap Lifts, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

c/o K. Akel
7928 Vineyard Lk Rd N
Jax, FL 32256

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to engage or transact in any or all lawful activities or business permitted under the laws of the US, the state of FL, or any other state.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Kibbee Akel
7928 Vineyard Lk Rd N
Jax, FL 32256

Fred Akel
13637 Beach Blvd.
Jax, FL 32224

ARTICLE VI REGISTERED AGENT

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

Fred Akel
13637 Beach Blvd.
Jax, FL 32224

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kibbee Akel
7928 Vineyard Lk Rd N
Jax, FL 32256

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

Date

9-5-00

Signature/Incorporator

Date

9-5-00

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00 SEP -7 PM 2:23
CLERK OF STATE
TALLAHASSEE, FLORIDA