Parametral Det 108668

FILED 00 NOV 20 PM 4: 22

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SECRETARY OF STATE TALLAHASSEE, FLORIDA

SUBJECT:	Pric	le Transportation, I	nc.		
_		(PROPOSED CORPO	RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	is na fin die kiin en al
Enclosed is an or	iginal	and one(1) copy of the art	icles of incorporation and a	check for:	
☐ \$70.00 Filing Fee	e .	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM	OM:	Vickie L. Robinson	1		
	_	Name	(Printed or typed)	<del></del>	<b>1</b>
		55400 Alco Road			
			Address	The same of the sa	e marik 富士 we to be
	-		y, State & Zip	70000347 -11/20/00- ******87.50	15477
			y, State & Zip	*****87.50	*****87.50
		352-759-374	1		

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

Daytime Telephone number

PH 11/21/00

ARTICLES OF INCORPORATION		-	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FIL	ED	
ARTICLE I NAME			
The name of the corporation shall be:	00 NOV 20	_ <del></del>	
Pride Transportation, Inc.	TALLAHASSE	OF STATE E, FLORIDA	-
ARTICLE II PRINCIPAL OFFICE			
The principal place of business/mailing address is:		:.	
55400 Alco Road P. O. Box 595	***	<del></del>	
Astor, Florida 32102			
ARTICLE III PURPOSE			
The purpose for which the corporation is organized is:	م بامانات		
To engage in any lawful act or activity for we corporation may be organized under such law.	nich a		
ARTICLE IV SHARES			
The number of shares of stock is:			. =
100 Shares			
ARTICLE V INITIAL OFFICERS DIRECTORS (optional)			
The name(s) and address(es):	•	·	
President: Vickie L. Robinson , P.O.Box Sec/Treas: Vickie L. Robinson , P.O.Box Sec/Tr	595, Astor,	FL 32102	*** ******************************
ARTICLE VI REGISTERED AGENT			
The name and Florida street address of the registered agent is:			
Vickie L. Robinson			
55400 Alco Road Astor, FL 32102			۰
ARTICLE VII INCORPORATOR			
The <u>name and address</u> of the Incorporator is:			
Vickie L. Robinson			
55400 Alco Road Astor, FL 32102			
******************	*****	******	
Having heen named as registered agent to accept service of process for the above stated corporate	ion at the place o		
certificale, I am familiar with and accept the appointment as registered agent and agree to act in	this capacity		
$  f_{tri}\cdot \mathcal{J}  _{\mathcal{I}}$	מורווו		
Signature/Registered Agent Vickie L. Robinson Da	ite /		
		- <del>-</del>	
Meui L Kehinsm)	11/17/00		
Signature/Incorporator Vickie L. Robinson D	ate		