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TRANSMITTAL LETTER

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

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SUBJECT: __Jones Trucking Services Inc.__
(PROPOSED CORPORATE NAME – **MUST INCLUDE SUFFIX**)

FILED 01 JAN 11 PM 1:29 SECRETARY OF STATE TALLAHASSEE FLORIDA

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: __Henry Jones__
Name (Printed or typed)

__1453 S. County Road 427__
Address

__Longwood, Fl. 32750__
City, State & Zip

__(407) 260-2249__
Daytime Telephone number

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

1-18-01

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:

Jones Trucking Services, Inc.

ARTICLE II   PRINCIPAL OFFICE
The principal place of business/mailing address is:

1452 S. County Rd 427
Longwood. Fl. 32750

ARTICLE III   PURPOSE
The purpose for which the corporation is organized is:

Transportation of freight.

ARTICLE IV   SHARES
The number of shares of stock is:

100

ARTICLE V   INITIAL OFFICERS/DIRECTORS (optional)
The name(s) and address(es):

President - Henry Jones
Vice-president - Lucinda Brookover

ARTICLE VI   REGISTERED AGENT
The name and Florida street address registered agent is:

1452 S. County Rd. 427
Longwood, Fl. 32750.

Lucinda Brookover

ARTICLE VII   INCORPORATOR
The name and address of the Incorporator is:

Henry Jones
1452 S. County Rd 427
Longwood. Fl. 32750

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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

Lucincia Brookover
Signature/Registered Agent

01-16-2001
Date

Henry Jones
Signature/Incorporator

0-16-2001
Date