

TRANSMITTAL LETTER
P01000039453

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

FILED
01 APR 18 PM 5:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: All STATE CARRIERS INC

(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:

Clive Hemmings

Name (Printed or typed)

17800 N.E. 8 Ave

Address

Miami FL 33162

City, State & Zip

786-428-0132

Daytime Telephone number

500004010725--7

-04/18/01--01073--009

*****78.75 *****78.75

D. WHITE APR 18 2001

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

ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

ALL STATE CARRIERS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

ALL STATE CARRIERS INC.
16764 N.E. 2 AVE.

NORTH MIAMI BEACH, FL 33162

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For the purpose of a trucking operation and for transacting any lawful business for which said corporation may be incorporated under the Florida General Corporation Act and under the jurisdiction in which the corporation may operate.

ARTICLE IV SHARES

The number of shares of stock is:

One hundred (100) shares which is the aggregate number to which the corporation shall have authority.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

*Names and address
of each person who
is to serve as a*

MONICA PURCELL

25 NW 151 ST.

N. MIAMI, FL 33169

CLIVE HEMMINGS

17800 NE 8 AVE.

N. MIAMI BEACH, FL 33162

*member of the
board of Directors*

ARTICLE VI REGISTERED AGENT

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

MONICA PURCELL

16764 N.E. 2 AVE.

NORTH MIAMI BEACH, FL 33162

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CLIVE HEMMINGS

17800 N.E. 8 AVE.

NORTH MIAMI BEACH, FL 33162

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

M Purcell

Signature/Registered Agent

4/9/01

Date

Clive Hemmings

Signature/Incorporator

4/9/01

Date