

P01000081143

TRANSMITTAL LETTER

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

SUBJECT: ALL MORALES TRUCKING INC.

400004534764--4
-08/14/01--01100--002
*****78.75--*****78.75

(Proposed corporate name – must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and 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

CARLOS MORALES

FROM: _____
Name (Printed or typed)

635 PINE STREET

Address

LAKEWORTH, FL 33460

City, State & Zip

(561) 586-6556

Daytime Telephone number

01 AUG 14 AM 9:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

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

T. Burch AUG 17 2001

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:
ALL MORALES TRUCKING INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

635 PINE STREET
LAKEWORTH
FL 33460
(561) 586-6556

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
AGENCY SERVICES FOR TRUCKING

ARTICLE IV SHARES

The number of shares of stock is:
100 SHARES OF \$1 EACH.

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):
CARLOS MORALES:DIRECTOR
635 PINE STREET
LAKEWORTH, FL 33460
(561) 586-6556

ARTICLE VI REGISTERED AGENT

The name and Florida Street address of the e agent are:

JAYACHANDRAN NAIR, 3402 GARDENS EAST DRIVE
PALM BEACH GARDENS, FL 33410

ARTICLE VII INCORPORATOR

The name and address of the incorporator are:

JAYACHANDRAN NAIR, 3402 GARDENS EAST DRIVE
PALM BEACH GARDENS, FL 33410

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

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TALLAHASSEE FLORIDA

with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

E. Sayachonwong

Signature/ Registered Agent

8/6/01

Date

E. Sayachonwong

Signature/ Incorporator

8/6/01.

Date