

PO1000116260

TRANSMITTAL LETTER

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

SUBJECT: A H L TRUCKING Inc.
(Proposed corporate name - must include suffix)

400004586974--6
-09/13/01--01044--008
131.25 **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

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: SANDRA L. -CAPO

Name (printed or typed)

5645 State Road 80 W

Address

LA BELLE, FLORIDA

City, State & Zip

(941) 458-1950- or (941) 849-1820

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 DEC -7 PM 2:06

FILED

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

W01-21507
8/9/17



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

September 17, 2001

SANDRA L. CAPO
5645 STATE RD. 80 WEST
LA BELLE, FL 33935

SUBJECT: A H L TRUCKING INC.
Ref. Number: W01000021507

We have received your document for A H L TRUCKING INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum
Document Specialist
New Filing Section

Letter Number: 601A00051924

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

A .H.L TRUCKING *INC.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5645 State Road 80 W
LA BELLE, FLORIDA 33935

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time

15 ONE HUNDRED (100) SHARES .COMMON STOCK AT \$1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WILLIE CAPO
5645 State Road 80W
LA BELLE, FLORIDA 33935

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SANDRA LEE CAPO - President
5645 State Road Wwest
LA BELLE, FL. 33935

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

6th day of September, 2001


Signature


Signature

N/A

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

A H L TRUCKING

2. The name and address of the registered agent and office is:

WILLIE CAPO

(NAME)

5645 State Road 80W.

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

LA BELLE, FLORIDA 33935

(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 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.

Willie Capo

(SIGNATURE)

11/29/01

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314