& Certificate of

Status

ADDITIONAL COPY REQUIRED

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

SUBJECT: Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$70.00 \$78.75 □ \$78.75 □ \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy

NOTE: Please provide the original and one copy of the articles. $M^{3}2-952$

OB 5/23



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 4, 2002

ANTHONY J. MIOTKE 902 NEW CASTLE COURT HOLLY HILL, FL 32117

SUBJECT: A. J. MIOTKE, INC. Ref. Number: W02000009522

We have received your document for A. J. MIOTKE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6972.

Letter Number: 902A00019894

Doris Brown Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	02 May a
ARTICLE I NAME The name of the corporation shall be:	
A. J. Miotke, Inc.	TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 902 New Castle Ct.	· —
Holly Hill FL. 32-117 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Transportation	-
ARTICLE IV SHARES The number of shares of stock is: 500	- -
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Or, Anthony J. Miotke 902 New Castle Ct.	, .
Holly Hill, FL. 32117 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Dr. Austhan T. Minths	· <u></u>
Dr. Anthony J. Miotke 902 New Castle Ct. Holly Hill FL. 32117 ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Dr. Anthony J. Miotke 902 New Castle Ct. ************************************	
Having been named as registered agent to accept service of process for the above stated corporation at certificate, I am familiar with and accept the appointment as registered agent and agree to act in this can be a service of process for the above stated corporation at certificate, I am familiar with and accept the appointment as registered agent and agree to act in this can be a service of process for the above stated corporation at certificate, I am familiar with and accept the appointment as registered agent and agree to act in this can be a service of process for the above stated corporation at certificate, I am familiar with and accept the appointment as registered agent and agree to act in this can be a service of process for the above stated corporation at certificate, I am familiar with and accept the appointment as registered agent and agree to act in this can be a service of process for the appointment as registered agent and agree to act in this can be also as a service of the appointment as registered agent and agree to act in this can be a service of the appointment as registered agent and agree to act in this can be a service of the appointment as registered agent and agree to act in this can be a service of the appointment as registered agent and agree to act in the service of the appointment agent ag	
Signature/Registered Agent Date	May 2002
Signature/Incorporator Nixtor Date	May 2002