

Division of Corporations

P020000073965

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Florida Department of State  
Division of Corporations  
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TALLAHASSEE, FLORIDA

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## Electronic Filing Cover Sheet

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## To:

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Fax Number : (850)205-0381

## From:

Account Name : TAPS  
Account Number : I20000000103  
Phone : (813) 664-0900  
Fax Number : (813) 664-1003

**FLORIDA PROFIT CORPORATION OR P.A.****Richards Auto Transportation, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	01 3
Estimated Charge	\$78.75

7/8/02  
3

7/8/02 09:00

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Department of State 7/8/2002 7:21 PAGE 1/1 Right FAX

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

July 8, 2002

TAPS

SUBJECT: RICHARDS AUTO TRANSPORTATION, INC.  
REF: W02000019531

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6972.

Doris Brown  
Document Specialist  
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*Completed*

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### Articles Of Incorporation

#### Article I

The name of the corporation shall be:  
Richards Auto Transportation, Inc.

#### Article II

The principal place of business / mailing address is:

Phys. 20 EGAN DR., PALM COAST, FL. 32164  
Mail P.O. BOX 351404, Palm Coast, FL 32135

#### Article III

The purpose for which the corporation is organized is:  
Transportation Services.

#### Article IV

The number of shares of stock is:  
100,000 shares

#### Article V

The name and address of initial officers/ directors:

Tony Surillo  
P.O. Box 351404  
Palm Coast, FL 32135

20 EGAN DR.  
PALM COAST, FL. 32164

#### Article VI

The name and Florida Street Address of the registered agent is:

Tony Surillo  
P.O. Box 351404  
Palm Coast, FL 32135

20 EGAN DR  
PALM COAST, FL. 32164

#### Article VII

The name and address of the Incorporator is:

Tony Surillo  
P.O. Box 351404  
Palm Coast, FL 32135

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.

X *Tony Surillo*  
Signature/ Registered Agent

7-5-02  
Date

X *Tony Surillo*  
Signature/ Incorporator

7-5-02  
Date

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