

P03000122406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

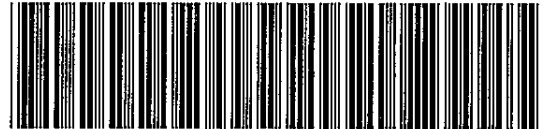
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/30/03--01041--017 **70.00

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03 OCT 30 PM 2:06

RECEIVED
STATE
TALLAHASSEE, FL 32301

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03 OCT 30 PM 1:3

STATE
TALLAHASSEE, FL 32301

20-02-03

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/St/Zip

850-222-2785

Phone #

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- CRAIG CARTER MOBILITY, INC.

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

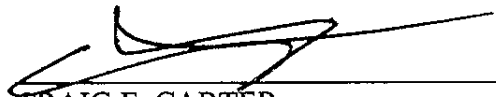
ARTICLES OF INCORPORATION
OF
CRAIG CARTER MOBILITY, INC.

Pursuant to Section 607.0202, Florida Statutes, these Articles of Incorporation provide that:

1. The name of the corporation is CRAIG CARTER MOBILITY, INC.
2. The principal office of the corporation is 4501 NW 6th Street, Gainesville, FL 32609.
3. The aggregate number of shares which the Corporation is authorized to issue is 100 shares of Common Stock, par value \$5.00 per share.
4. The street address of the initial registered office of this Corporation is 4501 NW 6th Street, Gainesville, FL 32609, and the name of the initial registered agent of this Corporation at that address is CRAIG E. CARTER.
5. The name and address of the person signing these Articles of Incorporation as incorporator is as follows:

CRAIG E. CARTER
3829 NW 36th Street
Gainesville, FL 32605

DATED this 28 day of OCT, 2003.


CRAIG E. CARTER

STATE OF FLORIDA
COUNTY OF ALACHUA

BEFORE ME, personally appeared before me, CRAIG E. CARTER, who is personally known to me or who has produced _____ as identification and who did take an oath, deposes and says he is the Incorporator of these Articles of Incorporation, and as such Incorporator verifies that all statements and information contained herein are true and correct.

DATED this 28th day of October, 2003.

Bevin G. Ritch
NOTARY PUBLIC




Bevin G. Ritch
MY COMMISSION # CC964123 EXPIRES
August 28, 2004
BONDED THRU TROY FAIR INSURANCE, INC.

Printed Notary Name, Expiration Date, Seal

**CERTIFICATE DESIGNATING THE ADDRESS AND AN
AGENT UPON WHOM PROCESS MAY BE SERVED**

Having been named to accept service of process for CRAIG CARTER MOBILITY,
INC., at the place designated in its Articles of Incorporation, I agree to act in this capacity and to
comply with the provisions of Section 607.0505 of the Florida Statutes.

Dated this 28 day of OCT, 2003.



CRAIG E. CARTER
Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA