

P03000123135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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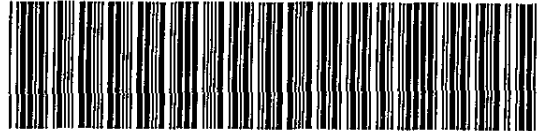
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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10/31

TRANSMITTAL LETTER

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

SUBJECT: TradeWind CARRIERS Incorporated
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

MARK A. Pickford
Name (Printed or typed)

P.O. Box 420053
Address

KISSIMMEE, FL. 34742
City, State & Zip

407-973-9004
Daytime Telephone number

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

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:

TRADEWIND CARRIERS Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

MAIL P.O. Box 420053
KISSIMMEE, FL. 34742

BUSINESS

5815 SWEET HILL RD
POLK CITY, FL.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT, TRANSPORTATION

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

MARK PICKFORD
P.O. Box 420053
KISSIMMEE, FL.
34742
PRESIDENT

TOM BUSH
4539 DAVID DR.
BARTOW, FL
33830

VICE PRES / TREASURER

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

MARK A. PICKFORD
5815 SWEET HILL RD
POLK CITY, FL. 33868

MAIL: P.O. Box 420053
KISSIMMEE, FL. 34742

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARK PICKFORD
PO Box 420053
KISSIMMEE, FL. 34742

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

Mark Pickford

Signature/Registered Agent

Oct 10, 03

Date

Mark Pickford

Signature/Incorporator

Oct 10, 03

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA