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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Coples Certificates of Status				
Special Instructions to Filing Officer;				

Office Use Only



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04 JAN -5 PH 6: 23
SECRETARY OF STATE

0. 1/12

TRANSMITTAL LETTER

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

SUBJECT:	<i>C.</i>	Jack	TRUCKING	- IN.	
	(PROPOS)	ED CORPORAT	E NAMÉ – <u>MUST INCL</u> I	JDE SUFFIX)	
Enclosed are an or	iginal and one (1) c	copy of the artic	les of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of	of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of	
			ADDITIONAL CO	Status PY REQUIRED	
FROM:	Chris	A S	ToC/ Printed or typed)		
3023 S.E. GALT CIRCLE					
	_PORT_SI	City, S	FL. 34	1984	
	772	785 - Daytime Te	6 400 lephone number		

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

	FILED	
'ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit	04 JAN -5 PM 6: 23	
•		
The name of the corporation shall be:	SECRETARY OF STATE TALLAHASSEE, FLORIDA	4
C. JOCK TRUCKING INC.		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:		
3023 S.E. GALT CIRCLE		
PORT ST. LUCIE, FL. 34984		
ARTICLE III PURPOSE		
The purpose for which the corporation is organized is:	•	
To Perform Trucking/ construction	IN STATE OF PLOPING	
ARTICLE IV SHARES		
The number of shares of stock is: 100 Shares		
ARTICLE V INITIAL OFFICERS AND/OR DIRECT	<u>ors</u>	
List name(s), address(es) and specific title(s):		
Chris A- TOCK PRESIDENT	KATALEON Kennedy JOCK	V.P.
3023 S.E. GALY CIRCLA	3023 SE GALY CIRCL & PORT ST. LUCIE, R. 34984	,
PORT St. LUCIA, FL. 34984	PORT ST. LUCIA, PC. 39 789	
ARTICLE VI REGISTERED AGENT		
The <u>name and Florida street address</u> of the registered agent is:		
GUERGE TUYN KALIOOMS 1104 PLECTHOOD LAWE		
Fact Pierca, FR- 3498]		
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is:		
Chris A JOCK		
3023 SE GALY CIRCLE PORT St. LUCIE, FZ. 34984		
*******************	***********************	: *
Having been named as registered agent to accept service of process for the a		this
certificate, I am familiar with and accept the appointment as registered agent	and agree to act in this capacity	-141 4# L
Statelon	12-19-03	
Signature/Registered Agent	Date	-

Signature/Incorporator

X 12-29- 03 Date