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TRANSMITTAL LETTER

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

KAIM TRUCKING INC. SUBJECT:					
SODJECI.	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed is an origina	l and one(1) copy of the article	es of incorporation and a	check for :		
\$70.00 Filing Fee	121 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	JMJ Services, Inc. Name (Printed or typed) 14580 S. Tamiami Trail				
	Address North Port, FL 34287				
	City, State & Zip				
	941-423-0834				
FROM:	Name (Pr 14580 A North City, 941-4	ervices, Inc. rinted or typed) S. Tamiami Trai: Address Port, FL 34287 State & Zip	Status PY REQUIRED		

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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

KAIM TRUCKING INC.

04 JAN 20 PM 4:58

SECHE STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

23051 Peachland Blvd. Port Charlotte, FL 33954

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Trucking/Delivery of Merchandise

ARTICLE IV SHARES

The number of shares of stock is:

1000 @ no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Kaim P. Rajkaran 23051 Peachland Blvd. Port Charlotte, FL 33954 President/Treasurer Radhika Sewkumar 23051 Peachland Blvd. Port Charlotte, FL 33954 Vice-President/Secretary

ARTICLE VI REGISTERED AGENT

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

Kaim P. Rajkaran 23051 Peachland Blvd. Port Charlotte, FL 33954

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JMJ Services Inc. 14580 S. Tamiami Trail North Port, FL 34287

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

Hoim Majkaran

Signature/Registered Agent

Date

1-15-04

Signature/Incorporator

Date