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## TRANSMITTAL LETTER

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

SUBJECT:	LawRence Se	nkins Inc		
	(PROPOSED CORPORAT	TE NAME – MUST INCLU	<u>DE SUFFIX</u> )	
Enclosed is an origina	I and one(1) copy of the article	es 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	
		ADDITIONAL CO	Status PY REQUIRED	
FROM: Ron Benfield Name (Printed or typed)				
58 Sidux Ciccle Address				
Havana, H 32333 City, State & Zip				
(858) 539-517/ 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:	FILED
Lawkence Jenkins Inc ARTICLE II PRINCIPAL OFFICE	2004 APR 16 P 3-10
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:  1933 Wood Ville Hwy Rowfold Ville	TALLAHASSEF, FLORIDA
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	·
Trucking	• •
ARTICLE IV SHARES The number of shares of stock is: // // // // // // // // // // // // //	
ARTICLE V INITIAL OFFICERS DIRECTORS (option of the name(s) and address(es):	(onal)
Lawrence Jenkins 1923 Woodville Hwy Cla	ewford ville, Fl 32327-Dees.
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	
Ron Benfield 58 Sioux Circle Havana, A 32333	
ARTICLÉ VII INCORPORATOR	
The name and address of the Incorporator is:  Rin Benfield  58 Sink Cikele	
Havara, H 32333	<b>*****************</b>
Having been named as registered agent to accept service of process for the ab certificate, I am familiar with and accept the appointment as registered agent of	**************************************
for befild	4/16/04
Signature/Registered Agent	Date
hir bafild	4/16/04
Signature/Incorporator	Date /