

P04000064868

Nolan Swain
(Requestor's Name)

95 Tillman Rd
(Address)

Quincy
(Address)

Quincy FLA 32352
(City/State/Zip/Phone #)

☐ PICK-UP ☒ WAIT ☐ MAIL

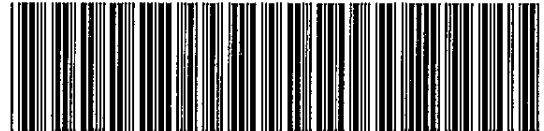
CNA Mailing, Inc
(Business Entity Name)

(Document Number)

Certified Copies ☒ Certificates of Status ☒

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4-20-04

TRANSMITTAL LETTER

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

SUBJECT: CNA Hauling, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: CNA Hauling, Inc.
Name (Printed or typed)

95 Tillman Road
Address

Quincy, Fla. 32352
City, State & Zip

850-627-9173
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:

CNA Hawking Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

95 Tillman Road
Quincy, Fla 32352

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any or all
lawfull bussiness
in state of FLA.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Nolan Swain, President
95 Tillman Road
Quincy, FL 32352

Clinton Swain, Vice-President
95 Tillman Road
Quincy, FL 32352

ARTICLE VI REGISTERED AGENT

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

Nolan Swain
95 Tillman Road
Quincy, FL 32352

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nolan Swain
95 Tillman Road
Quincy, FL 32352

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

Nolan Swain
Signature/Registered Agent

4/20/04
Date

Nolan Swain
Signature/Incorporator

4/20/04
Date

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