

PO4000066492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

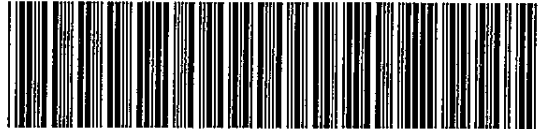
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04 APR 19 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7504/22/04

TRANSMITTAL LETTER

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

SUBJECT: KLASSIC TRUCKING, 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: LESLIE NEUNIE

Name (Printed or typed)

11270 S W 21ST STREET

Address

MIRAMAR FL 33025

City, State & Zip

954.430.9340.

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:

KLASSIC TRUCKING INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11270 S W 21ST STREET
MIRAMAR, FL 33025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PERFORM TRUCKING RELATED SERVICES

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):

LESLIE NEUNIE, PRESIDENT
11270 S W 21ST STREET
MIRAMAR, FL 33025

ARTICLE VI REGISTERED AGENT

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

LESLIE NEUNIE
11270 S W 21ST STREET
MIRAMAR, FL 33025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KELLMAN & COMPANY, P.A.
4431 N W 30 TH CT
LAUDERDALE LAKES
FL 33313

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



Signature/Registered Agent



Signature/Incorporator
JOANEL KELLMAN, CPA



Date



Date

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04 APR 19 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA