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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone : (850)222-1173 Fax Number : (850)224-1640

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# FLORIDA PROFIT CORPORATION OR P.A.

#### THORNTON TRUCKING INC.

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#### ARTICLES OF INCORPORATION

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Thornton Trucking Inc.

The undersigned incorporator(s), for the purpose of forming a corporation under the Fiorida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE | NAME

The name of the corporation shall be: Thornton Trucking Inc.

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JACKLIAN OF STATE
TALLAHASSEE, FLORIDA

## ARTICLE IL PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7400 Powers Avenue Apt. #275 Jacksonville, FL 32217

## ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CorpDirect Agents, Inc. 103 North Meridian St. Lower Level Tallahasses, FL 32301

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### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Belinda Schory 600 N. 2nd St., Ste. 500 Harrisburg, PA 17101

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

13th day of Beptember 2004.

Signature

Signature

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#### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 807.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1.	The name of the corporation is: Thornton Trucking, Inc.	The second secon
2.	The name and address of the registered agent and office is:  Corphirect Agents, Inc.	O4 SEP
	(NAME) 103 North Meridian St., Lower Level	3 = 3 = E
	(P.O. BOX NOT ACCEPTABLE) Tallahasses, FL 32301	8: 39 FORDZ
	(CITY/STATE/ZIP)	4

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PER-FORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGA-TIONS OF MY POSITION AS REGISTERED AGENT.