

P04000136771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

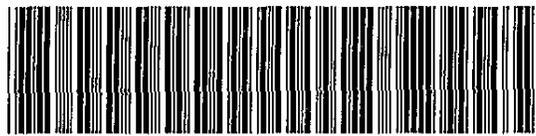
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



300040989243

10/04/04--01002--004 **78.75

RECEIVED 04 OCT -1 PM 4:36
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

[Handwritten signature]

TRANSMITTAL LETTER

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

SUBJECT: NOTS 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
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: OMAR SMITH
Name (Printed or typed)

1726 AUGUSTINE PLACE
Address

TLH FL 32301
City, State & Zip

950 412 9198
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)

RECEIVED
04 OCT -1 PM 4:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

NOTS TRUCKING, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

1420 BANJA DR
TCH, FL 32305

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR PROFIT CORP

ARTICLE IV SHARES

The number of shares of stock is:

4

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

OMAR SMITH 1726 AUGUSTINE PLACE TCH FL 32301 DIRECTOR
NICOLE SMITH 1420 BANJA DR TCH, FL 32305 DIRECTOR
TIMOTHY SMITH SR 1420 BANJA DR TCH FL 32305 DIRECTOR
TIMOTHY SMITH JR 1420 BANJA DR TCH FL 32305 DIRECTOR

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

OMAR SMITH
1726 AUGUSTINE PLACE
TCH, FL 32301

ARTICLE VII INCORPORATOR

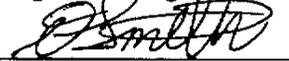
The name and address of the Incorporator is:

OMAR SMITH
1726 AUGUSTINE PL
TCH, FL 32301

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

10-01-04
Date


Signature/Incorporator

10-01-04
Date