# P04000/43457



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SECRETARY OF STATE SECRETARY OF STATE

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# TRANSMITTAL LETTER

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

(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 \$87.50 Filing Fee Filing Fee Filing Fee, & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: KELLY BICHARD Name (Printed or typed) 9537 BALM RIVERVIEW ROAD Address RIVERVIEW, FL 33569 City, State & Zip

813 672-2103

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

# 700

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# 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:

T N T DELIVERY SERVICE, INC

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 916 SKYVIEW DRIVE BRANDON, FL 33510

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO CONDUCT DELIVERY SERVICE OPERATION

#### ARTICLE IV SHARES

The number of shares of stock is:

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Michael J O'Toole, President and Director

#### ARTICLE VI REGISTERED AGENT

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

Kelly Bichard 9537 Balm Riverview Road Riverview, FL 33569

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Michael J. O'Toole 916 Skyview Drive Brandon, FL. 33510

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

Date

Date