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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
,		
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE
FALLAHASSET FLORIDA
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TRANSMITTAL LETTER

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

SUBJECT: Pascal	Transportation, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate o Status PY REQUIRED
FROM: Ke	n Arena Accounting & Tax Servic	e	
	Name	(Printed or typed)	
	910 Lithia Pinecrest Road		
		Address	
	Brandon, FL 33511 City,	State & Zip	
	(813) 341-2501	elephone number	
	Daytime	orophono namoor	

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)

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ARTICLE I NAME

The name of the corporation shall be:

Pascal Transportation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 6333 Christina Groves Circle - W, Lakeland, FL 33813

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

to engage in any activity or business permitted under the laws of the United States and the State of Florida,

ARTICLE IV SHARES

The number of shares of stock is:

One thousand (1,000) shares of common stock each having a par value of \$.01 per share.

INITIAL OFFICERS AND/OR DIRECTORS

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

President/Secretary/Director:

Michael L. Pasquerella

6333 Christina Groves Circle - W

Lakeland, FL 33813

Vice-President/Treasurer/Director

Donna Pasquerella

6333 Christina Groves Circle - W

Lakeland, FL 33813

REGISTERED AGENT ARTICLE VI

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

Ken Arena, EA 910 Lithia Pinecrest Road Brandon, FL 33511

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael L. Pasquerella 6333 Christina Groves Circle - W Lakeland, FL 33813

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 fan<u>ill</u>ar with and accept the appointment as registered agent and agree to act in this capacity

Kena Signature/Registered Agent

Signature/Incorporator

11/21/04 Date 1/-21-04