P05000006571

| (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: | | | | |
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Office Use Only



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TALLAHASSEP FLORIDA

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SECRETA Y DE STATE

TRANSMITTAL LETTER

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

| SUBJECT: <u></u> | NS Truck | , - | j nc |
|----------------------|--|--|--|
| | (PROPOSED CORPOR | ATE NAME – <u>MUST INCL</u> | <u>UDE SUFFIX</u>) |
| | | | |
| Inclosed are an orig | inal and one (1) copy of the ar | rticles of incorporation and | d 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 of Status PPY REQUIRED |
| FROM: | ROBER T | New MA | |
| | 2.0 | Address | Kung Blud |
| | Sunte #106 (2) | tugna FC 3 y, State & Zip | SECRETAR ALLAHASS |

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

Daytime Telephone number

| 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: | |
| ANS Trucken Line Inc | |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 5925 5 Martin Little King Blue! | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | |
| Service, TRANSPORT | |
| ARTICLE IV SHARES The number of shares of stock is: /00 | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Lenwood Sapp St Robert 3510 Oncens Boro Ave South 4433 BA | Newmond SECRETARY C TALLY MASSES |
| St Pelaceburgh PC 33711 THAMPH P | 233617ET NO. 77 |
| The name and Florida street address (P.O. Box NOT acceptable) of the reference of the refer | |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Lenwood Stopp So 3510 Queens Boro Are S. | |
| St Blessburgh R 33711 | **** |
| Having been named as registered agent to accept service of process for the above stated certificate. I am familiar with and accept the appointment as registered agent and agree to | |
| Dood Newman | 1-13-65 |
| Signature/Registered Agent | 1-13-05 |
| Signature/Incorporator | Date |