

P05000022301

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

2/11/05

TRANSMITTAL LETTER

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

Attn: Valerie
Engram

SUBJECT: TCB Transportation 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: TCB Transportation Inc.

Name (Printed or typed)

10420 Glades Cut Off Rd

Address

Port Saint Lucie, FL 34986

City, State & Zip

772-468-9976

Daytime Telephone number

ALL
MAY 10 2005
TALLAHASSEE, FLORIDA

2005 FEB -9 PM 2:42

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

2005 FEB -9 PM 2:42

MAIL
TALLAHASSEE FLORIDA

August 20, 2004

TERRY MASSEY
601 SW ANDROS CIR
PORT SAINT LUCIE, FL 34986

SUBJECT: TCB TRANSPORT LLC
Ref. Number: W04000031812

We have received your document for TCB TRANSPORT LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Ingram
Document Specialist
New Filings Section

Letter Number: 904A00051393

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:

TCB Transportation Inc.

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STATE
ALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10420 Glades Cut Off Rd Port Saint Lucie, FL 34986

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The company may engage in any activity or business permitted under the laws of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

50,000 Common Shares (\$0.25 per share)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Director: Terry Massey 10420 Glades Cut Off Rd Port Saint Lucie, FL 34986

ARTICLE VI REGISTERED AGENT

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

Director: Terry Massey 10420 Glades Cut Off Rd Port Saint Lucie, FL 34986

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Director: Terry Massey 10420 Glades Cut Off Rd Port Saint Lucie, FL 34986

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

Terry Massey
Signature/Registered Agent

2/9/05
Date

Terry Massey
Signature/Incorporator

2/9/05
Date