

P05000074485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

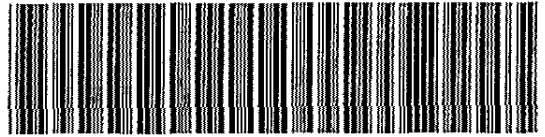
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FILED  
05 MAY 19 PM 1:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5/23/05  
Bluk

## TRANSMITTAL LETTER

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

SUBJECT: B.J. LYBARGER 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: ACCOUNTING ASSOCIATES  
Name (Printed or typed)

1964 INDIANOLA AVE.

Address

DES MOINES, IA. 50315

City, State & Zip

515-283-1040

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)

**FILED**

05 MAY 19 PM 1:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

B.J. LYBARGER TRUCKING, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

4119 - 4TH ST SW  
LEHIGH ACRES, FL. 33971

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

THE TRANSACTION OF ANY OR ALL LAWFULL PURPOSES FOR WHICH CORPORATIONS  
MAY BE INCORPORATED UNDER THE FLORIDA BUSINESS ACT.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

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

BETTE J. LYBARGER  
4119 - 4TH ST. SW  
LEHIGH ACRES, FL. 33971

**ARTICLE VI REGISTERED AGENT**

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

BETTE J. LYBARGER  
4119 - 4TH ST. SW  
LEHIGH ACRES, FL. 33971

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

BETTE J. LYBARGER  
4119 - 4TH ST SW  
LEHIGH ACRES, FL. 33971

\*\*\*\*\*

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:

Bette J. Lybarger  
Signature/Registered Agent

5/16/05  
Date

Bette J. Lybarger  
Signature/Incorporator

5/16/05  
Date