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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status	<u></u> - · -	
Special Instructions to	Filing Officer:			
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8/18/

State of Florida Dept of Corporations P.O. Box 6327 Tallahassee, FL 32314

Sirs:

Find attached an application for Registration of Corporation of: **AAM TRUCKING SERVICES INC..** Find enclosed payment of:

Filing Fees		\$ 35.00
Registered Agent Des	ignation	\$ 35.00
Certified Copy	_	\$ 8.75
TOTAL		\$ 78.75

Please remit the Certified Copy to the address of record.

Thank You

