

P05000123307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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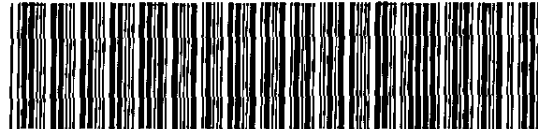
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
05 SEP -9 AM 10:29
SECURITY DIVISION
TALLAHASSEE, FLORIDA

RECEIVED
05 SEP -9 AM 10:20
SECURITY DIVISION
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Full Throttle 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: Christopher M. Africano
Name (Printed or typed)

4905 CR 136-A
Address

Live Oak, FL 32060
City, State & Zip

386-364-4281
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)

ARTICLE I NAME

The name of the corporation shall be: *Full Throttle Trucking, Inc.*

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *4905 CR 136-A
Live Oak, FL. 32060*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *For Profit Trucking Company*

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): *Christopher M. Africano, VP, S, T
Cory R. Snider, President*

ARTICLE VI REGISTERED AGENT

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

*Christopher M. Africano
4905 CR 136-A
Live Oak, FL. 32060*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Christopher M. Africano
4905 CR 136-A
Live Oak, FL. 32060*

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

Christopher M. Africano

Signature/Registered Agent

9-8-05

Date

Christopher M. Africano

Signature/Incorporator

9-8-05

Date