

P05000 13796g

(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:

Office Use Only



200060170302

10/06/05--01/06/06--016 **18.15

FILED
05 OCT -6 AM 11:43
TALLAHASSEE, FLORIDA

10/10
SP

COVER LETTER

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

SUBJECT: Sharine 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: Karen Wolfe

Name (Printed or typed)

269 Fields Park Road

Address

Morgantown, WV 26508

City, State & Zip

(304) 685-4224

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:

Sharine Transportation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

931 W. Orange Blossom Trail, Apt. C
Apopka, FL 32712

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Transportation of freight

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

James Smith - President
931 W. Orange Blossom Trail
Apt. C
Apopka, FL 32712

ARTICLE VI REGISTERED AGENT

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

James Smith
931 W. Orange Blossom Trail
Apt. C
Apopka, FL 32712

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Karen Wolfe
269 Fields Park Road
Morgantown, WV 26508

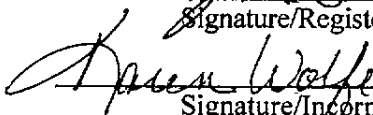
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

9-26-05

Date



Signature/Incorporator

9-19-05

Date

FILED
05 OCT -6 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA