

PO6000001446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

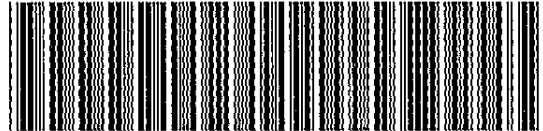
(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status

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06 JAN -5 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
06 JAN -5 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01/05/06 11:40 AM

TRANSMITTAL LETTER

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

SUBJECT: CSO Specialized 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:

Faye Rickett

Name (Printed or typed)

400 Industrial Loop

Address

Labelle FL 33935

City, State & Zip

239 898 8138

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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:

CSO specialized INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

400 S Industrial Loop
Labelle FL 33935

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Trucking

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Faye Pickett

ARTICLE VI REGISTERED AGENT

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

Faye Pickett
400 S Industrial Loop
Labelle FL 33935

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Faye Pickett
400 S Industrial Loop
Labelle FL 33935

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

Faye Pickett
Signature/Registered Agent

Faye Pickett
Signature/Incorporator

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 JAN -5 AM 11:40

FILED

11/30/05
Date

11/30/05
Date