

PO60000002241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

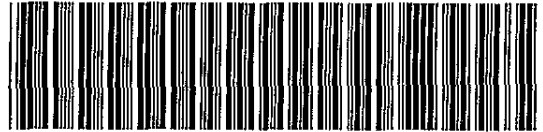
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Certificates of Status \_\_\_\_\_

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2006 JAN -5 PM 3:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Attention: JAN 06 2006

## COVER LETTER

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

SUBJECT: Ride On Trucking Co.  
(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: Mike Rivera  
Name (Printed or typed)

511 S.E. Cliff Rd.  
Address

Port Saint Lucie, Florida 34984  
City, State & Zip

772-519-6590  
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:

Ride On Trucking Co.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

511 S.E. Cliff Rd. Port Saint Lucie, FL. 34984

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Transportation of goods

**ARTICLE IV SHARES**

The number of shares of stock is:

100 Shares

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

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

Mike Rivera, 511 S.E. Cliff Rd. Port Saint Lucie, FL. 34984

**ARTICLE VI REGISTERED AGENT**

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

Mike Rivera, 511 S.E. Cliff Rd. Port Saint Lucie, FL. 34984

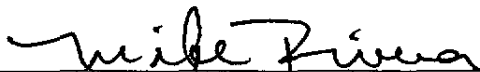
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

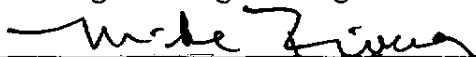
Mike Rivera, 511 S.E. Cliff Rd. Port Saint Lucie, FL. 34984

\*\*\*\*\*

*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



Signature/Incorporator

**FILED**

2006 JAN -5 PM 3:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1-1-06

Date

1-1-06

Date