P06000006496

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
	•	

Office Use Only



400063410574

m/11/06--01017--019 **87.50

NOW THE WORK NOTING

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 GLW 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 \$78.75 \$87.50 **\$78.75** Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of ع المعطورة من Status ADDITIONAL COPY REQUIRED 509 LILLIAN DR.
Address FERN PARK, FL 32730 City, State & Zip

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

321-231-8910

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

GLW TRANSPORTATION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

509 LILLIAN DR

FERN PARK, FL 32730

ARTICLE III _ PURPOSE

The purpose for which the corporation is organized is:

TRANSPORTATION

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):

GUY L. WOOD, PRESIDENT

509 LTLLEAN DR

FERN PARK, FL 32730

ARTICLE VI REGISTERED AGENT

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

GUYL, WOOD

509 LILLIAN DR

FERN PARK, FL 32730

ARTICLE VII INCORPORATÓR

The name and address of the Incorporator is:

GUY LI WOOD

509 LILLIAN DR

FERN PARK, FL 32730

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/Incorporator

J-9-06

Signature/Incorporator

Date

OIVISION TARY OF STATE AMION