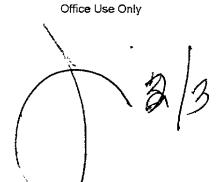
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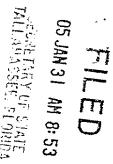
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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COVER LETTER

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

SUBJECT: EBEN-EZER Trucking Co. of Polk County (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the art	icles of incorporation and	l a check for:
☐ \$70.00	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED
FROM: Maxon Geffard	(Printed or typed)	
3328 Avenue J NV	J Address	
Winter Haven FL 33	3881 , State & Zip	
Daytime *	Celephone number	

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

ARTICLES OF INCORPORATION

OF

EBEN-EZER Trucking Co. of Polk County

THE UNDERSIGNED, being over the age of eighteen years, in order to form a corporation pursuant to the provisions of the Corporate Code, hereby certifies as follows:

Article I Identification

The name of the corporation, hereinafter referred to as the "Corporation," is EBEN-EZER Trucking Co. of Polk County.

Article II Period of Existence

The period during which the corporation shall continue is perpetual.

Article III Registered Office and Registered Agent

The address of the initial registered office of the Corporation is 3328 Avenue J NW, Winter Haven FL 33881 and the name and address of the initial registered agent therein and in charge thereof, upon whom process against the Corporation may be served, is Maxon Geffard, 3328 Avenue J NW, Winter Haven FL 33881. The mailing address for the Corporation is 3328 Avenue J NW, Winter Haven FL 33881.

Article IV Purpose

The purpose of the Corporation is to engage in any or all lawful business for which corporations may be organized under the provisions of the General Corporation Law of Florida.

Article V Shares

The total authorized capital stock of the Corporation is 100 shares having a Par Value of \$1.00. All or any part of said shares may be issued by the Corporation from time to time and for such consideration as may be determined upon or fixed by the Board of Directors, as provided by law.

Article VI Incorporator's Address

The name and post office address of the Incorporator(s) and initial Director(s) of the Corporation is as follows:

President: Maxon Geffard 3328 Avenue J NW Winter Haven FL 3388

The effective date of this Article of Incorporation shall be 0/26, 2006.

IN WITNESS WHEREOF, the undersigned Incorporator(s) has caused this Article of Incorporation to be executed as of _______, 2006.

Incorporator

STATE OF FLORIDA)
COUNTY OF POLK)

The forgoing Articles of Incorporation were acknowledged before me, this day of ______, 2006.

NOTARY PUBLIC State of Florida

My Commission Expires:

CAROL D. LAMONS
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # DD205258
EXPIRES 06/15/2007
BONDED THRU LABBINGTARY1

ACCEPTANCE BY REGISTERED AGENT

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

Mayor Coffee Signature/Registered Agent

Date

05 JAN 31 AM 8: 53