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SECRETARY OF STATE
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COVER LETTER

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

| SUBJECT: Z & | Z Trucking, Inc. | | |
|--------------------|---|--|---|
| | (PROPOSED CORPORA) | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an or | iginal and one (1) copy of the artic | cles of incorporation and | i a check for: |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED |
| FROM: N | Maxine Stanberry | | |
| | . Name (| (Printed or typed) | , |
| | 8609 Vermanth Rd | • | |
| | A | Address | · · |
| | Jax, FL 32211 | | ************************************** |
| | City, | State & Zip | |
| | 904-805-8969 | -lb | · · · · · · · · · · · · · · · · · · · |
| | Daytime To | elephone 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:

Z & Z Trucking Inc.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8609 Vermanth Rd. Jacksonville, FL 32211

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hauling

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):

Maxine Stanberry, 8609 Vermanth Rd.

Jacksonville, FL 32211, President

Tiffany Burch, 8609 Vermanth Rd.

Jacksonville, FL 32211, Vice President

ARTICLE VI REGISTERED AGENT

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

Maxine Stanberry

8609 Vermanth Rd.

Jacksonville, FL 32211

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Maxine Stanberry 8609 Vermanth Rd.

Jacksonville, FL 32211

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 | Date |
| Maxim Stambury | 5-24-00 |
| Signature/Incorporator/Robistaced Agent | Date |