

PA6000086071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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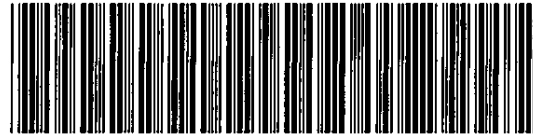
(Business Entity Name)

(Document Number)

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06 JUN 26 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pa

TRANSMITTAL LETTER

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

SUBJECT: TAMI PLEICKHARDT TRUCKING, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: TAMI PLEICKHARDT
Name (Printed or typed)

11407 SCALLOP DRIVE
Address

PORT RICKEY, FL 34668
City, State & Zip

(727) 514-4509
Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

TAMI PLEICKHARDT TRUCKING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11407 SCALLOP DRIVE
PORT RICHEY, FL 34668

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONTRACT TRUCKING

ARTICLE IV SHARES

The number of shares of stock is:

ONE HUNDRED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

TAMI PLEICKHARDT, PRESIDENT, TREASURER & SECRETARY
11407 SCALLOP DRIVE
PORT RICHEY, FL 34668

ARTICLE VI REGISTERED AGENT

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

TAMI PLEICKHARDT
11407 SCALLOP DRIVE
PORT RICHEY, FL 34668

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TAMI PLEICKHARDT
11407 SCALLOP DRIVE
PORT RICHEY, FL 34668

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

X Tami Pleickhardt
Signature/Registered Agent

X 6/17/06
Date

X Tami Pleickhardt
Signature/Incorporator

X 6/17/06
Date