

P060000099828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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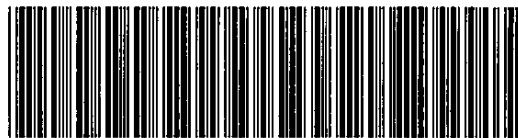
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 JUL 31 AM 8:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
8/1

COVER LETTER

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

SUBJECT: Robert Cole Trucking, 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
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: Taxman, Inc.

Name (Printed or typed)

4520 19th Ave SW Suite 5

Address

Fargo, ND 58103

City, State & Zip

701-282-3300

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:

Robert Cole Trucking, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4520 19th Ave SW Suite 5
Fargo, ND 58103

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

50,000 (fifty thousand)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Robert Cole, 334 Currituck Drive, Jacksonville, FL 32225 (President)

ARTICLE VI REGISTERED AGENT

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

Kim Morgan, 334 Currituck Drive, Jacksonville, FL 32225

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert Cole, 334 Currituck Drive, Jacksonville, FL 32225

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

Kim Morgan
Signature/Registered Agent

Robert Cole
Signature/Incorporator

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/16/06
Date

5/16/06
Date