## -POZOOOSONO

| (Re                     | questor's Name)   |           |
|-------------------------|-------------------|-----------|
| (Ad                     | dress)            |           |
| (Ad                     | dress)            |           |
| (Cit                    | y/State/Zip/Phone | ff)       |
| PICK-UP                 | ☐ WAIT            | MAIL MAIL |
| (Bu                     | siness Entity Nam | e)        |
| (Do                     | cument Number)    |           |
| Certified Copies        | Certificates      | of Status |
| Special Instructions to | Filing Officer:   |           |
|                         |                   |           |
|                         |                   |           |
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|                         | Office Use Only   | ,         |



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## COVER LETTER

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

| SUBJECT: US TOWING OF CENTRAL FIORID                  | a, inc.                    |                 |
|---|----------------------------|-----------------|
| (PROPOSED CORPORA                                     | TE NAME – <u>MUST INCL</u> | .UDE SUFFIX)    |
|   |                            |                 |
|   |                            |                 |
|   |                            |                 |
| Enclosed are an original and one (1) copy of the arti | ales of incorporation and  | da check for    |
| Enclosed are an original and one (1) copy of the are  | eles of meorporation and   | a direction.    |
| ☐ \$70.00 <b>✓</b> \$78.75                            | \$78.75                    | \$87.50         |
| Filing Fee Filing Fee                                 | Filing Fee                 | Filing Fee,     |
| & Certificate of Status                               | & Certified Copy           | Certified Copy  |
| or opposite of Sunds                                  | ac common copy             | & Certificate o |
|   |                            | Status          |
|   | ADDITIONAL CO              |                 |
|   |                            |                 |
|   |                            |                 |
|   |                            |                 |
| Dhondo I. Turnor                                      |                            |                 |
| FROM: Rhonda L. Turner                                | (Printed or typed)         |                 |
| Name  | (Printed or typed)         |                 |
| 47740 NF 400 3 Obs -1                                 |                            |                 |
| 1746 NE 162nd Street                                  |                            | <del></del>     |
|   | Address                    |                 |
|   |                            |                 |
| Citra, FL 32113                                       |                            |                 |
| City,   | State & Zip                |                 |
|   |                            |                 |
| 352-361-1800  |                            |                 |
| Daytime T   | 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:   | 9   |
| U S Towing of Central Florida, Inc.   |   |
| ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  | FILED  7 JUL 12 PM 1:47  LLAHASSEE, FLORIDA |
| 1746 NE 162nd Street, Citra, FL 32113   | I: 47<br>ORIDA                              |
| ARTICLE III PURPOSE   |   |
| The purpose for which the corporation is organized is:  |   |
| To engage for profit in a towing company.   |   |
| ARTICLE IV SHARES The number of shares of stock is: 1000  | ·   |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  |   |
| President - Rhonda L. Turner - 1746 NE 162nd Street, Citra, FL 32113 CEO - Roger Lee Turner - 117 Crestwood Drive, Painesville, OH 44077  |   |
| ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered at Rhonda L. Turner 1746 NE 162nd Street Citra, FL 32113                                       | gent is:                                    |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Rhonda L. Turner 1746 NE 162nd Street Citra, FL 32113   | •   |
| **************************************  | *******                                     |
| Having been named as registered agent to accept service of process for the above stated corporation certificate, I am familiar with and accept the appointment as registered agent and agree to act in this | n at the place designated in this capacity  |

Signature/Incorporator