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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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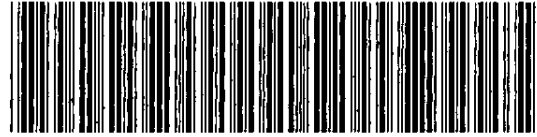
(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUN 16 PM 2:59

EP 6/17/08

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June 12, 2008

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

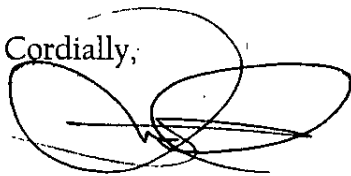
RE: Vanderbilt Services, Inc.

Dear Department of State:

Enclosed please find the original and two copies of Articles of Incorporation for Vanderbilt Services, Inc., as well as a check in the amount of \$78.75. Please file the same with your office and return the file-stamped copy to me in the enclosed self-addressed stamped envelope.

Should you have any questions, please do not hesitate to contact me.

Cordially;



Thomas R. Hill

TRH/bj

Encl.

COVER LETTER

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

SUBJECT: Vanderbilt Services, 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: Thomas R. Hill

Name (Printed or typed)

8695 College Boulevard, Suite 200

Address

Overland Park, KS 66210

City, State & Zip

913-339-6888

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:

Vanderbilt Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

2281 Island Cove Circles, Naples, Florida 34109

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Transportation and logistics, consultation and other lawful purposes

ARTICLE IV SHARES

The number of shares of stock is:

1,000 at no par

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Thomas C. Bauer, President, Secretary and Treasurer
2281 Island Cove Circle
Naples, FL 34109

ARTICLE VI REGISTERED AGENT

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

Thomas C. Bauer
2281 Island Cove Circle
Naples, FL 34109

ARTICLE VII INCORPORATOR

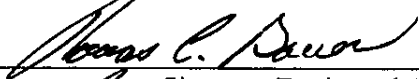
The name and address of the Incorporator is:

Thomas C. Bauer
2281 Island Cove Circle
Naples, FL 34109

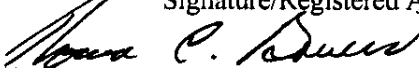
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator



Date



Date