

78000098021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

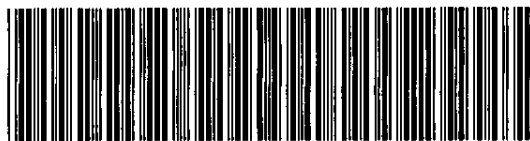
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/03/08--01001--015 **70.00

RECEIVED
08 OCT 31 PM 3:51
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 OCT 31 PM 3:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: _____

Anglin 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: _____

Tommy Anglin

Name (Printed or typed)

1031 Nature Trailing

Address

Tallahassee FL 32310

City, State & Zip

229-254-5660

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:

Anglin Trucking Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Anglin Trucking Inc
1031 Nature Trailway
Tallahassee FL 32310

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Trucking

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

P. Tommy Anglin
1031 Nature Trailway
Tallahassee FL 32310

ARTICLE VI REGISTERED AGENT

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

Tommy Anglin
1031 Nature Trailway
Tallahassee FL 32310

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tommy Anglin
1031 Nature Trailway
Tallahassee FL 32310

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

Tommy Anglin
Signature/Registered Agent

10/30/08
Date

Tommy Anglin
Signature/Incorporator

10/31/08
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA