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09 OCT 16 PM 6:40
CLERK OF DISTRICT COURT
ALBANY, NEW YORK

PA
10-19-09

COVER LETTER

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

SUBJECT: CMS Professional Transport, 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: Christopher Samson
Name (Printed or typed)

P.O. Box 2227
Address

Lake City, FL, 32056
City, State & Zip

386-752-9440
Daytime Telephone number

Chris@cmsprostaff.com
E-mail address: (to be used for future annual report notification)

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:

CMS Professional Transport, Inc.

ARTICLE II PRINCIPAL OFFICE

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

181 SE Hernando Ave.
Lake City, FL
32025

P.O. Box 2227
Lake City, FL
32056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Christopher Samson
P.O. Box 2227
Lake City, FL 32056
CEO/ President

Kelvin Samson
P.O. Box 2227
Lake City, FL 32056
Vice - President

ARTICLE VI REGISTERED AGENT

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

Christopher Samson
181 SE Hernando Ave.
Lake City, FL
32025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Christopher Samson
P.O. Box 2227
Lake City, FL 32056

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

10-14-09

Date



Signature/Incorporator

10-14-09

Date

FILED
09 OCT 16 PM 6:41