

P10000081473

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

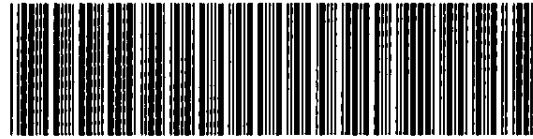
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

David Hay **DAVE**
AUTHORIZATION BY PHONE TO
CORRECT *Article IV*
DATE *10/6/10*
DOC. EXAM *MRD*

Office Use Only



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10/04/10--01021--021 **87.50

FILED

10 OCT -4 PM 3:33

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRD
10/6

COVER LETTER

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

SUBJECT: **HEAVY D'S 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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: **DAVID LEONARD HAYES**

Name (Printed or typed)

477 THORNBERRY ROAD

Address

ORANGE PARK, FL 32073

City, State & Zip

904-866-8121

Daytime Telephone number

dlhayes86@yahoo.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

HEAVY D'S TRUCKING, INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
477 THORNBERRY ROAD
ORANGE PARK, FL 32073

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HAUL FREIGHT

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DAVID L. HAYES/OWNER
Address: 477 THORNBERRY ROAD
ORANGE PARK, FL 32073

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

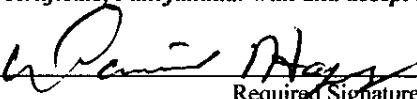
Name: DAVID L. HAYES
Address: 477 THORNBERRY ROAD
ORANGE PARK, FL 32073

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DAVID L. HAYES
Address: 477 THORNBERRY ROAD
ORANGE PARK, FL 32073

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

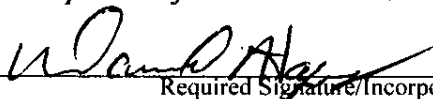


Required Signature/Registered Agent

10/01/2010

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

10/01/2010

Date

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10 OCT - 4 PM 3:33
TALLAHASSEE, FLORIDA
SECRETARY OF STATE