P11000084954

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
•				

Office Use Only



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- 500212581945 09/28/11--01006--001 **70.00

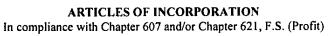
> SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

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

Tallahassee, FL 32314		
SUBJECT: OWL TRANSPORTAT	ION, INC.	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the art		•
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
Depurancia of Stars Novi Piling Seotlo. Class and Seotlo. Class covers of	ADDITIONAL CO	Status OPY REQUIRED
FROM: LASTER WALKER	e (Printed or typed)	,
2512 Tuscan Oaks Lane	Address	
Jacksonville, FL 32223 City,	, State & Zip	
(904) 755-4720 Daytime 7	Telephone number	
owlinc@bellsouth.net E-mail address: (to be use	ed for future annual report	t notification)

NOTE: Please provide the original and one copy of the articles.





ARTICLE I	NAME		11 000 no
The name of the co	rporation shall be: Owl Transportation,	Inc.	11 SEP 28 PM 3: 19
ARTICLE II	PRINCIPAL OFFICE		SECREJANY OF STATE
	Principal street address	Mailing	addra LITATION STATE
2	512 Tuscan Oaks Lane		THE WASSEL PLURIDA
4	acksonville, FL 32223		
_		 	
ARTICLE III	PURPOSE		
The purpose for w	hich the corporation is organized is:		
of transacting	any and all lawful business.		
ARTICLE IV	·		
The number of shar	es of stock is: 1000		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	ORS	
	tle:Laster B. Walker, President		
Address:	2512 Tuscan Oaks Lane	Address:	
	Jacksonville, FL 32223		
Name and Ti	tle:	Name and Title	
Address:		Address:	
radiess.			
	tle:		
Address:			
			
	REGISTERED AGENT		
	rida street address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	Ann K. Smith, Esquire		
Address:	1616 Jork Road, Suite 302		
	Jacksonville, FL 32207		
ARTICLE VII	INCORPORATOR		
The name and ado	Iress of the Incorporator is:		
Name:	Ann K. Smith, Esquire		
Address:	1616 Jork Road, Suite 302		
	Jacksenville, FL 32207		
Having been name	ed as registered agent to accept service of pro	cess for the above stated con	rporation at the place designated in
	n familiar with and accept the appointment as		
	1 /		2
			9-210-11 Date
	Required Signature/Registered Agent		Date
			ha Calaa laCamuudan arkaalii t
	ment and affirm that the facts stated herein		
aocument to the D	epartment of State constitutes a third degree fe	iony as proviueu jor in \$.81 /	Hoo, Fidi
			0.21.11
	Required Signature/Incorporator		9.20.11 Date
	- require distantine ineciporator		