

P11000104617

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

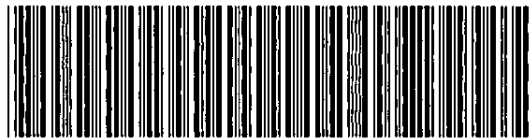
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11 DEC - 8 PM 3:54

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

11 DEC - 8 PM 4:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K 12/08/11

## COVER LETTER

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

SUBJECT: ZTG Motor Carriers  
(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      ☐ \$78.75  
Filing Fee      Filing Fee  
& Certificate of Status

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

**ADDITIONAL COPY REQUIRED**

FROM: Charles E. Griffin  
Name (Printed or typed)

5309 Horton Rd  
Address

Plant City, FL 33567  
City, State & Zip

(813) 951-5112  
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

I will not Revoke the Dissolu  
OF ZTC Motor CARRIES Tax  
#P10000038829

Chas. E. H.

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11 DEC -8 PM 4:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

ZTC Motor ~~CARRIERS~~  
CARRIERS INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

5309 Horton Rd  
Plant City, FL 33567

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Doing business as a freight hauler

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ~~Mark L. Griffin~~ ~~owner~~  
Address: ~~5309 Horton Rd~~  
~~Plant City, FL~~

Name and Title: CHARLES E. GRIFFIN  
Address: 5309 Horton Rd  
Plant City, FL

Name and Title: ~~owner~~  
Address: \_\_\_\_\_

Name and Title: ~~DIRECTOR~~  
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: Debra E. Griffin  
Address: 5309 Horton Rd  
Plant City, FL 33567

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Charles E. Griffin  
Address: 5309 Horton Rd  
Plant City, FL 33567

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

Debra E. Griffin  
Required Signature/Registered Agent

12/8/11  
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.

Mark L. Griffin  
Required Signature/Incorporator

12/18/11  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA