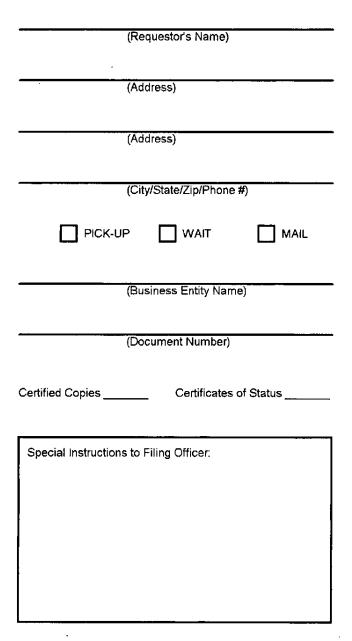
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SECHETALY OF STATE TALLAHASSEE. FLORIDA

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## COVER LETTER

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

SUBJECT: Vince Wells Trucks In	c
(PROPOSED CORPOR	ATE NAME – <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the ar	ticles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Vincent C Wells Jr	ne (Printed or typed)
3010 Beaver Ave	
	Address
Middleburg FL 32068 City	, State & Zip
(904) 312-7065  Daytime	Telephone number
amhedrick22@aol.com E-mail address: (to be us	ed 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 Vince Wells Trucks I	no.	APA.
The name of the	corporation shall be:	TIC .	2.0
ADTICLET	PRINCIPAL OFFICE		11 DEC 30 AM 12: 04
ARTICLE II	Principal street address	Mailing addres	ss, if different is:
	3010 Beaver Ave	Trialing address	SECSIFICALLY ALL STATE
	Middleburg FL 32068		TALLAHASSEE FLORIDA
		•	
ARTICLE III	PITRPOSE		
	which the corporation is organized is:		
	e of this corporation is to offer freigh	t transport services.	
The number of sl	hares of stock is: 1000		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	ORS	
	Title:Vincent C Wells Jr. President		
Address:	3010 Beaver Ave	Address:	
	Middleburg FL 32068		
			<del></del>
Name and	Title: Annette Wells, Secretary	Name and Title:	
Address:	3010 Beaver Ave	Address:	
	3010 Beaver Ave Middleburg FL 32068		
Name and	Title:	Name and Title:	
Address:			
ARTICLE VI	REGISTERED AGENT		
	Torida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Annette Wells	<u>,                                     </u>	
Address:	3010 Beaver Ave		
	Middleburg_FL_32068	<u> </u>	
ARTICLE VII	INCORPORATOR		
	ddress of the Incorporator is:		
Name:	Vincent C Wells Jr	<u></u>	
Address:	3010 Beaver Ave		
	Middleburg_FL_32068	<u></u>	
Having been na	med as registered agent to accept service of pro	cess for the above stated cornoration	on at the place designated in
his certificate, I	am familiar with and accept the appointment as	registered agent and agree to act in	this capacity
1	1 77 00	G G	• •
Smell	D/Wells		12-27-11
	Required Signature/Registered Agent		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.

juried Signature/Indorporator