

P 12000023908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

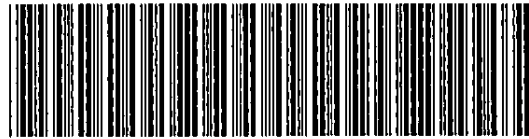
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/12/12--01003--007 **140.00

FILING CANCELLED
RETURNED CHECK

RECEIVED
12 MAR 12 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
12 MAR 12 AM 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAR 12 2012

COVER LETTER

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

SUBJECT: H + H COURIENS, 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: Anthony Hunt
Name (Printed or typed)

P.O. Box 55 1543
Address

JACKSONVILLE, FL 32255
City, State & Zip

(904) 24-3455
Daytime Telephone number

thunt538@comcast.net
E-mail address: (to be used for future annual report notification)

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

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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:

H + H Couriers, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
P.O. Box 551543
Jax, FL 32255

Principal
Mailing address, if different is:

9216 Leith Dr.
Jax FL 32208

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Courier Service

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anthony Hunt P
Address: 9216 Leith Dr.
Jax, FL 32208

Name and Title:
Address:

Name and Title: ~~Anthony Hunt~~ Eloise Hunt VP
Address: 9216 Leith Dr.
Jax, FL 32208

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: Anthony Hunt
Address: 9216 Leith Dr.
Jax, FL 32208

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Anthony Hunt
Address: 9216 Leith Dr.
Jax, FL 32208

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

3/12/12
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

3/12/12
Date

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TALLAHASSEE, FLORIDA