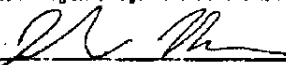
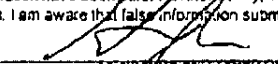


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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16 NOV -9 PM 4:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P12000086381					
1. Corporation Name STERLING TRANSPORT CO., INC.					
2. Principal Office Address - No P.O. Box # 3801 US Hwy 1 State, Apt. #, etc. City & State Vass, NC Zip 28394			3. Mailing Office Address PO BOX 456 State, Apt. #, etc. City & State Lakeview, NC Zip 28350		
Country USA			Country USA		
4. Date Incorporated or Qualified To Do Business in Florida 10/12/2012					
5. FEI Number 56-1914925					Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED YES					\$8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND State, Apt. #, etc. City PLANTATION State FL Zip Code 33324					
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent  Date 11/09/2016 REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
P	Hugh Hinton, JR	891 NC Highway 73		West End, NC 27376	
S	Hugh Hinton, SR	160 Cherokee Rd		Pinehurst, NC 28374	
10. E-mail Address: mlowe@sterlingtransport.com (To be used for future annual report notification)					
11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that 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. SIGNATURE:  Hugh Hinton, SR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 11-07-16 Daytime Phone # 910-2456502					

K. ASHTON

20x2

Florida Department of State
Division of Corporations
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Fax Number : (850) 617-6384

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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Fax Number : (954) 208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**CORPORATION REINSTATEMENT
STERLING TRANSPORT CO., INC.**

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