

2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 19, 2009
Secretary of State**

DOCUMENT# P12654

Entity Name: SOUTHEASTERN FREIGHT LINES, INC.

Current Principal Place of Business:

420 DAVEGO ROAD
LEXINGTON, SC 29073 US

New Principal Place of Business:

420 DAVEGA ROAD
LEXINGTON, SC 29073 US

Current Mailing Address:

P.O. BOX 1691
COLUMBIA, SC 29202 US

New Mailing Address:

FEI Number: 57-0301199 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION COMPANY
1201 HAYES ST.
STE. 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: UNTIED STATES CORPORATION COMPANY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CASSELS, W.T., JR.
Address: 420 DAVEGA ROAD
City-St-Zip: LEXINGTON, SC 29073

Title: P () Delete
Name: CASSELS, W. TOBIN III
Address: 420 DAVEGA ROAD
City-St-Zip: LEXINGTON, SC 29073

Title: S () Delete
Name: CASSELLS, W. TOBIN
Address: 420 DAVEGA ROAD
City-St-Zip: LEXINGTON, SC 29073

Title: V () Delete
Name: BURLESON, J.R., JR.
Address: 420 DAVEGA ROAD
City-St-Zip: LEXINGTON, SC 29073

Title: D () Delete
Name: CASSELS, W. TOBIN, III
Address: 420 DAVEGA ROAD
City-St-Zip: LEXINGTON, SC 29073

Title: VPC () Delete
Name: EDGE, P. THOMAS
Address: 420 DAVEGA ROAD
City-St-Zip: LEXINGTON, SC 29073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: P THOMAS EDGE

Electronic Signature of Signing Officer or Director

VPC

10/19/2009

Date