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(Requestor's Name)

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(City/State/Zip/Phone #)

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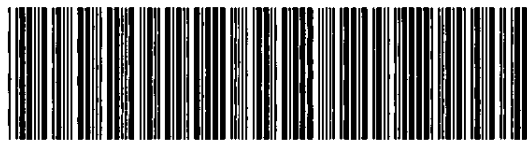
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 FEB - 1 P 2:30

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2/1

COVER LETTER

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

SUBJECT: Zoe Land & Trucking 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: Zoe Land & Trucking Inc.

Name (Printed or typed)

1315 E. Lancewood Place

Address

Delray Beach, Fla. 33445

City, State & Zip

(954) 919-8866

Daytime Telephone number

zltrucking@yahoo.com

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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CLERK OF STATE
TALLAHASSEE, FL 32314

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: Zoe Land Trucking Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1315 E. Lancewood Place

Delray Beach, Fl. 33445

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hauling & redelivery of various types of merchandise & goods
from various customer contracts.

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joseph Floreal, Pres.

Name and Title: _____

Address 1315 e. Lancewood Place

Address: _____

Delray Beach, fl. 33445

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

SECRETARY OF STATE
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

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(cont;)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Joseph Floreal
Address: 1315 E. Lancewood Place
Delray Beach, Fla. 33445

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joseph Floreal
Address: 1315 E. Lancewood Place
Delray Beach, Fl. 33445

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

(X) 
Required Signature/Registered Agent

Jan. 15, 2013
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.

(X) 
Required Signature/Incorporator

Jan. 15, 2013
Date