

P13000081517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

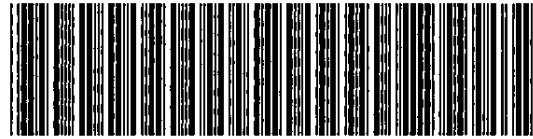
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/02/13--01012--012 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 OCT -2 PM 4 56

Ps 10/3/13

Division of Corporations
Tallahassee Florida

To Whom It May Concern:

I am requesting that my corporation name of Terry A. Myers Trucking Inc
Be released and I do not retain the name effective immediately.

This is a unanimous choice by the stockholders.

Thank you,

Terry A. Myers

COVER LETTER

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

SUBJECT: Terry A Myers Trucking Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and check for:

☐

\$70.00
Filing Fee

☒

\$78.75
Filing Fees &
Certificate of Status

☐

\$78.75
Filing Fee
& Certified Copy

☐

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Nettie Davis, Inc.
846 SW Main Blvd.

Lake City, FL 32026
Name (Printed or typed)

Address

City, State & Zip

386-752-4576

Daytime Telephone number

Nettie Davis Inc@gmail.com
Email Address: (to be used 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) **13 OCT -2 PM 1:56**

ARTICLE I NAME

The name of the corporation shall be: Terry A. Myers Trucking Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address mailing address, if different is:
3414 Soutel Dr
JACKSONVILLE, FL 32208

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any & All Legal purposes

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTIONS

Name and Title: Terry Myers Pres Name and Title: _____
Address: 3414 Soutel Dr Address: _____
JACKSONVILLE, FL 32208

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

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: Terry Myers
Address: 3414 Soutel Dr
JACKSONVILLE, FL 32208

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: W. Davis, Inc.
Address: 846 SW Main Blvd.
Lake City, FL 32025

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

Terry A. Myers
Required Signature/Registered Agent

9/30/13
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.

W. Davis
Required Signature/Incorporator

9/30/13
Date