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PICK-UP	☐ WAIT	MAIL			
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Special Instructions to Filing Officer:					
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SECRETARY OF STATE OR LINES.

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COVER LETTER

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

SUBJECT: NORRIS TRANSPORTATION INC. (PROPOSED CORPORARE NAME - MUST INCLUDE SUFFIX)						
Enclosed are an original and one (1) copy of the articles of incorporation and check for:						
\$70.00 Filling Fee	\$78.75 Filling Fees & Certificate of Status \$78.75 Filling Fee & Certified Copy & Certificate of Status					
ADDITIONAL COPY REQUIRE						
FROM:	L 					
Name (Printed or typed) Neitie Davis, Inc.						
846 SW Main Stud						
Lake City, FL 32025 ress						
	City, State & Zip					
	386-152-4576					
	Daytime Telephone number					
	Email Adress: (to be used for future annual report notification)					

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



August 2, 2013

NETTIE DAVIS, INC. 846 SW MAIN BLVD. LAKE CITY, FL 32025

SUBJECT: NORRIS TRANSPORTATION, INC.

Ref. Number: W13000043244

We have received your document for NORRIS TRANSPORTATION, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 813A00018625

www.sunbiz.org

District of Commentions D.O. DOV 0007 Melleleness Elected 2001



August 19, 2013

NETTIE DAVIS, INC. 846 SW MAIN BLVD. LAKE CITY, FL 32025

SUBJECT: NORRIS TRANSPORTATION, INC

Ref. Number: W13000043244

We have received your document for NORRIS TRANSPORTATION, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

We can not file a duplicate corporation with the same name of an active entity.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section

www.sunbiz.org

Letter Number: 813A00018625

Division of Corporations Tallahassee Florida

To Whom It May Concern:

I am requesting that my corporation name of Norris Transportation, Inc.

Be released and I do not retain the name effective immediately.

This is a unanimous choice by the stockholders.

Thank you,

Ralph Keith Norris

13 OCT -2 PM 3: 32

ARTICLE I The name of the		ES OF INCORPO Chapter 607 and/or Chap RAWS portal	oter 621, F.S. (Profit)	19 OCT -2 PM SECREDARY OF FALLAHASSEE, F
ARTICLE II	PRINCIPAL OFFICE			3: 32 STALE LORIBA
	Principal <u>street</u> addı _846 SW M6		mailing address, if differen	nt is be
	LAKE City F	132025		
ARTICLE III The purpose for	PURPOSE r which the corporation is organ	nized is: ANY FA)	Lawful Busin	ve55
ARTICLE IV The number of	SHARES shares of stock is:	,		
ARTICLE V Name and Title Address:	INITIAL OFFICERS AND NORRIS RA) 846 SW MAIN LAKE CHUF	Name and Titl Address:	le:	
Name and Titic Address:		Name and Titl Address:	le:	
Name and Title Address:	#	Name and Titl	le:	
The <u>name and</u> Name:	REGISTERED AGENT Florida street address (P.O. F	Box NOT acceptable) of th	ne registered agent is:	
Address:	Cate City F	+32021 +32021		
ARTICLE VI				
The <u>name and</u> Name:	address of the Incorporator is:			
Address:	Notice Davis, Inc. 846 SW Main Blvd	<u> </u>		
	Lake City, FL 3202, med us registered agent to accept so familiar with and accept the appoi	ervice of process for the abov		designated in this
2 0-0)	plad	_
resph	Required Signature/Registered	Agent	Date	<u> </u>
	rument and affirm that the facts st Department of State constitutes a			bmitted in a
1/011	Navon		7/29/	/3
venn	Required Signature/Incorporate	or	Date	