

P13000085614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

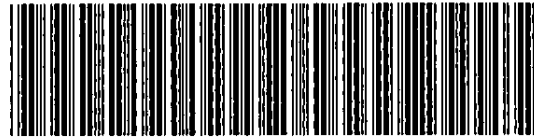
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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2013 OCT 21 AM 10:38
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

APPROVED
AND
FILED
13 OCT 21 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ps 10/21/13

COVER LETTER

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

SUBJECT: _____

Tallahassee Transport, 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: _____

Brett Wier

Name (Printed or typed)

2910 Kerry Forest Pkwy 04-275

Address

Tallahassee FL 32309

City, State & Zip

850 339 8353

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
FILED

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:

Tallahassee Transport INC

13 OCT 21 AM 10:48

ARTICLE II PRINCIPAL OFFICE

Principal street address

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2910 Kerry Forest Pkwy

D4-275

Tallahassee FL 32309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Trucking

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Brett Luter - President

Name and Title:

Address

2910 Kerry Forest Pkwy

Address:

D4-275

Tallahassee FL 32309

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

APPROVED
AND
FILED (cont.)

13 OCT 21 AM 10:48

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Brett Wier
Address: 2910 Kerry Forest Pkwy D4-275
Tallahassee FL 32309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Brett Wier
Address: 2910 Kerry Forest Pkwy D4-275
Tallahassee FL 32309

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

Brett Wier

Required Signature/Registered Agent

10-21-13

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.

Brett Wier

Required Signature/Incorporator

10-21-13

Date