

P14000049582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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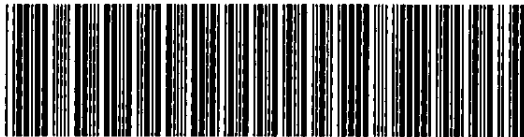
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/06/14--01013--003 **\$7.50

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14 JUN -6 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06/10/14

COVER LETTER

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

SUBJECT: Spring Hill Transportation 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: George H. Thurlow
Name (Printed or typed)

7495 Madrid Road
Address

Weeki Wachee, FL 34613
City, State & Zip

207-651-9632
Daytime Telephone number

ght5141961@gmail.com
E-mail 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)

ARTICLE I NAME

The name of the corporation shall be: Spring Hill Transportation Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7495 Madrid Rd.

Weeki Wachee, FL 34613

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Provide transportation for hire.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: George H. Thurlow

Name and Title: _____

Address: President/ Treasurer

Address: _____

7495 Madrid Rd

Weeki Wachee, FL

Name and Title: Pamela H. Thurlow

Name and Title: _____

Address: V. President/ Sec.

Address: _____

7495 Madrid Rd

Weeki Wachee, FL

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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(conti.)

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: George Thurlow
Address: 7495 Madrid Rd.
Weeki Wachee, FL 34613

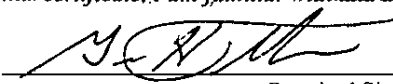
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: George Thurlow
Address: 7495 Madrid Rd
Weeki Wachee, FL 34613

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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

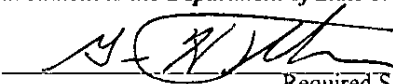


Required Signature/Registered Agent

05/29/2014

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.



Required Signature/Incorporator

05/29/2014

Date