

PA000092528

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SUBJECT: SAM N SUZ ENTERPRISES INC

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

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

FROM: SAMUEL WEDDINGTON

2515 SE 19TH CIRCLE

Ocala, FL 34471

352-816-2020

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 NAMEThe name of the corporation shall be: SAM N SUZ ENTERPRISES INC**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

2515 SE 19TH CIRCLE519 E LEWIS & CLARK PKWYOCALA, FL 34471CLARKSVILLE, IN 47129**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: OVER-THE-ROAD TRUCK DRIVER**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: SAMUEL WEDDINGTON, PRESIDENT

Name and Title: _____

Address: 2515 SE 19TH CIRCLE

Address: _____

OCALA, FL 34471Name and Title: SUZETTE WEDDINGTON, VICE-PRES

Name and Title: _____

Address: 2515 SE 19TH CIRCLE

Address: _____

OCALA, FL 34471

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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SECRETARY
FILED

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: SAMUEL WEDDINGTON
Address: 2515 SE 19TH CIRCLE
OCALA, FL 34471

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SAMUEL WEDDINGTON
Address: 2515 SE 19TH CIRCLE
OCALA, FL 34471

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CLERK OF COURT
FLORIDA

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

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

Date