

P18000006555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

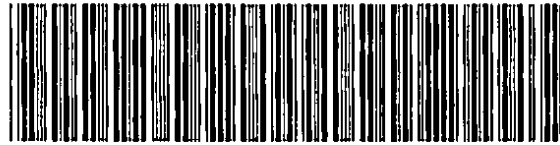
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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18 JAN 18 PM 4:44  
CLERK OF COURT  
JAN 18 2018

JAN 22 2018

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FEIN  
82-3797484

COVER LETTER

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

SUBJECT: Williams 60/40 Trucking & Construction 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

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee.  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

FROM: Willie James Williams  
Name (Printed or typed)  
409 Avenue M N.E.  
Address  
Winter Haven, Florida 33881  
City, State & Zip  
863-612-5553  
Daytime Telephone number  
WW8076297@gmail.com  
E-mail address: (to be used for future annual report notification) m

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

FEIN  
82-3797484

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 Williams 60/40 Trucking & Construction Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

409 Avenue M N.E.  
Winter Haven, Florida 33881

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Fruit, Juice, Meat, Transportation  
Construction Inc.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

President

Name and Title:

Willie J. Williams

Name and Title:

Address

409 Avenue M N.E.  
Winter Haven Florida 33881

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE, FLORIDA

FEIN

82-3797484

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

ARTICLE VI REGISTERED AGENT

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

Name: Willie J. Williams

Address: 409 Avenue M N.E.  
Winter Haven Florida 33881

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Willie J. Williams

Address: 409 Avenue M.N.E  
Winter Haven Florida 33881

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 1/17/18 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Willie J. Williams

Required Signature/Registered Agent

1/11/18

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.

Willie J. Williams

Required Signature/Incorporator

1/11/18

Date