P1800063644

(Re	questor's Name)				
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(Cit	y/State/Zip/Phone	e #)			
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18 JUL 23 PH 4: 36



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 13, 2018

DANELL BOMAN 2463 WYLENE STREET JACKSONVILLE, FL 32209 US

SUBJECT: D BOMAN TRUCKING INC

Ref. Number: W18000064120

We have received your document for D BOMAN TRUCKING 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 title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

Please return 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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 818A00014436

Terence N. Thurson

Full Service Accounting Firm 8672 Phillips Highway Jacksonville, FL 32256 Tele: (904) 764-7717 Fax: (904) 652-0365

Email: tutrlt1@bellsouth.net Web: thursonaccounting.com

July 5, 2018

RE: P16000068743

D BOMAN TRUCKING INC

Attn: Danell D Boman 2463 Wylene Street Jacksonville, FL 32209

To Whom This May Concern,

The above referenced individual Mr. Danell Boman is the owner of this corporation and has no plans on reinstating the old corporation. He would like to start a new corporation but with the same name.

Very Truly Yours,

/wellham

Terence N Thurson

Danell Boman - President

Danell Boman

COVER LETTER

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

SUBJECT: D BOM	AN TRUCKING INC					
50bJEC [(PROPOSED CORPORA	ATE NAME - MUST INCL	UDE SUFFIX)			
Enclosed are an orig	inal and one (1) copy of the art	cicles of incorporation and	d a check for:			
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	Status			
		ADDITIONAL CO	PY REQUIRED			
FROM:	NELL BOMAN Nam	e (Printed or typed)				
246	3 WYLENE STREET					
		Address				
JAC	CKSONVILLE, FL 32209					
	City, State & Zip					
904	-600-8463					
	Daytime 1	elephone number				
TN	TRLT1@BELLSOUTH.NET					
	E-mail address: (to be use	ed 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 521, F.S. (Profit)

MLENE STREET	Principal <u>street</u> address	N	Mailing address, if different is.	
(SONVILIE,				_>
	th the corporation is organized is:		SINESS.	
	of stock is:	 -		SSEC. FLO
	DANELL D BOMAN - PRESIDENT	Name and Title:_		ACITY COMPANY
Address	2463 WYLENE STREET JACKSONVILLE, FL 32209	Address:		
	or (s)			
	 -			
Name and Ti	ile:	Name and Title:		
Name and Ti Address	ile:	Address		
		Address		
Address		Address		

Name	and Title:	Name and Title:	
Addre	<u>.</u>	Address:	
			
	REGISTERED AGENT		
The <u>name and</u> Name:	Floride street address (P.O. Box NOT acce DANELL D BOMAN	otable) of the registered agent is:	
Address:	2463 WYLENE STREET	-	
•	JACKSONVILLE, PL 32209		18
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		JUL 23
The name and a	iddress of the Incorporator is:		23 PM 4: 36
Name:	DAMELL D BOMAN		
Address:	2463 WYLENE STREET		© > 6
	JACKSONVILLE, FL 32209		
Effective date, if	<u>EFFECTIVE DATE;</u> other than the date of filing: sate is listed, the date must be specific and	. (OPTIONAL cannot be more than live days p	.) prior or 90 days after the
Note: If the date the document's e.	inserted in this block does not meet the app flective date on the Department of State's re	licable statutory filing requirement cords.	s, this date will not be listed as
Having been nun this certificate, I t	ned as registered agent to accept service of p on familiar with and accept the appointmen	process for the above stated corport as registered agent and agree to a	ration at the place designated in ict in this capacity
_ Danell	Bequired Signature/Registered Age		7/5/18
-*			Date
I submit this doci document to the L	ament and affirm that the facts stated here Department of State constitutes a third degree	n are true. I am aware that the fa efelony as provided for in s.817,15	alse information submitted in a 15, F.S
Danel	A Bornon— ed Signature Incorporator		$\frac{7\sqrt{5\sqrt{18}}}{6\pi}$
Requir	ed Signature Incorporator	_	Dare