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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 08 2018

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COVER LETTER

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

SUBJECT: BLACK TIP TRUCKING 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: AUSTIN JAMES SCHEERINGA
Name (Printed or typed)

415 WINDING BROOK LN. UNIT 103
Address

BRADENTON FL. 34212
City, State & Zip

941-799-0079
Daytime Telephone number

SCHEERINGA AUSTIN @ VAHOO.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: BLACK TIP TRUCKING INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

415 WINDING BROOK LN.
BRADENTON FL 34212

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TRANSPORTING GOODS FROM
THE FACTORY TO THE RETAIL STORES

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: AUSTIN JAMES SCHERRINGA PRESIDENT

Address 415 WINDING BROOK LN. Address:
BRADENTON FL 34212

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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TALLAHASSEE, FLORIDA

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: AUSTIN JAMES SCHEERINGA

Address: 415 WINDING BROOK LN.
BRADENTON FL 34212

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: AUSTIN JAMES SCHEERINGA

Address: 415 WINDING BROOK LN.
BRADENTON FL 34212

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 11/1/18 (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

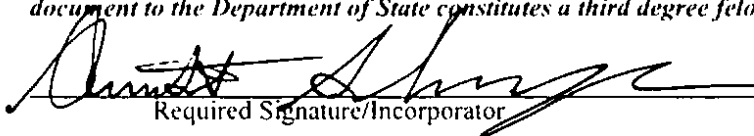


Required Signature/Registered Agent

11-1-18

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 §817.155, F.S.



Required Signature/Incorporator

11-1-18

Date