

P2400002799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

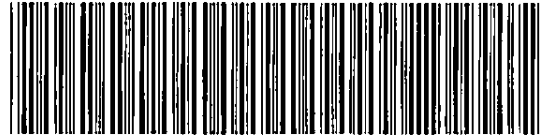
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

MS

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SUGAR SANDS EXPRESS CO.

Please Debit FCA000000003 For: 70

Thank you Seth Neeley



Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

112 Pender & Perrying • Tallahassee, FL 32301

___ Art of Inc. File _____
___ LTD Partnership File _____
___ Foreign Corp. File _____
___ L.C. File _____
___ Fictitious Name File _____
___ Trade/Service Mark _____
___ Merger File _____
___ Art. of Amend. File _____
___ RA Resignation _____
___ Dissolution / Withdrawal _____
___ Annual Report / Reinstatement _____
___ Cert. Copy _____
___ Photo Copy _____
___ Certificate of Good Standing _____
___ Certificate of Status _____
___ Certificate of Fictitious Name _____
___ Corp Record Search _____
___ Officer Search _____
___ Fictitious Search _____
___ Fictitious Owner Search _____
___ Vehicle Search _____
___ Driving Record _____
___ UCC 1 or 3 File _____
___ UCC 11 Search _____
___ UCC 11 Retrieval _____
___ Courier _____

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COVER LETTER

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

SUBJECT: SUGAR SANDS EXPRESS CO.
(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 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: EMILY HOLLY CURBOW
Name (Printed or typed)
11837 SW 32ND LANE
Address
GAINESVILLE, FL, 32608
City, State & Zip
352-281-8550
Daytime Telephone number
96gatorbait@gmail.com
E-mail address: (to be used for future annual report notification)

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

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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: SUGAR SANDS EXPRESS CO.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11837 SW 32ND LANE GAINESVILLE, FL 32608

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TRANSPORTATION & LOGISTICS

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EMILY HOLLY CURBOW - P.

Name and Title: JASON RUSSELL JOINER - V.

Address 11837 SW 32ND LANE
GAINESVILLE FL 32608
PRESIDENT

Address: 1191 CARRIAGE RIDGE DR
GREENSBORO GA 30642
VICE PRESIDENT

Name and Title: HAROLD B. ROBINSON JR. - T.

Name and Title: KEVIN B. ROBINSON - S.

Address 210 N BEACON SHORES DR
SENECA SC 29672
TREASURER

Address: 400 BRECK AVE
RICHMOND KY 40475
SECRETARY

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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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: EMILY HOLLY CURBOW

Address: 11837 SW 32ND LANE
GAINESVILLE FL 32608

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: EMILY HOLLY CURBOW

Address: 11837 SW 32ND LANE
GAINESVILLE FL 32608

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

E Holly Curbow
Required Signature/Registered Agent

4/17/2024
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.

E Holly Curbow
Required Signature/Incorporator

4/17/2024
Date