## P950000 22175

### TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassae, Fl. 32314

	lusa Transpor		<del></del>	4.5 55	
Enclosed is an origina		name - must include su	i		ゴニゴロは
for : \$70.00 Filing Fee	X \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	#131.25 Filing Fee, Certified Copy & Certificate by Required	3.m B	
FROM:		ansportation I	nc		
	1750 Eas	t Duval St.			
		Address	· · · · · · · · · · · · · · · · · · ·		
	Jackso	nville, FL 32	202		
	Ci	ty, State & Zip			
	904-791	-9366			
	Daytime	Telephone number			

CHESSER MAR , U 1775

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

## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

#### ARTICLE | NAME

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The name of the corporation shall be: Calusa Transportation Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1750 East Duval Street Jacksonville, FL 32202

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Chad S Roberts 1750 East Duval Street Jacksonville, Fl 32202

## ARTICLE V INCORPORATORIS

The name(s) and street address(es) of the incorporator(s) to these Articles of incorporation is(are):

Chad S Roberts 1750 Eas Duval St Jacksonville, FL 32202

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

15th day of March 19 95 .

Signature

Signature

Articles of Incorporation Filing Fee - \$35

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Calusa Transportation In	ic
2. The name and address of the registered agent and office is:	595 178 SECRET
<u>Chad S Roberts</u> (Name)	- 第二日
1750 East Duval St (P.O. Box or Mell Drop Box NOI acceptable)	
Jacksonville, FL 32202 (City/State/Zip)	
Having been named as registered agent and to accept service of prabove stated corporation at the place designated in this certificate, the appointment as registered agent and agree to act in this capacit to comply with the provisions of all statutes relating to the proper an formance of my duties, and I am familiar with and accept the obligation as registered agent.	ocess for the I hereby accept y. I further agree Id complete per- ions of my posi-
(Signature) 3-15-95 (Date	

October 2, 1997

CALUSA TRANSPORTATION INC. 1750 E DUVAL STREET JACKSONVILLE, FL 32202

SUBJECT: CALUSA TRANSPORTATION INC.

Ref. Number: P95000022175

Debit Memo #: 17397-M

This is to inform you that check #15247 in the amount of \$550.00 submitted with the annual report for CALUSA TRANSPORTATION INC. has been returned by your bank because of NON-SUFFICIENT FUNDS.

We request you remit a cashier's check or money order, referencing the above named debit memo number, in the amount of \$577.50 made payable to the Department of State to cover the unpaid fees and service charge.

Section 607.1421 or 617.1421, Florida Statutes, requires at least 60 day notice of our intent to administratively dissolve or revoke your corporation for failure to file the annual report and pay the filing fee. Consider this your 60 day notice if the payment is not received, your corporation will be administratively dissolved or revoked on or after December 2, 1997 and a reinstatement fee of an additional \$585 will be imposed to reactivate the corporation.

Please send the replacement check to my attention at the address listed below.

If you have any questions concerning the filing of your document, please call (850) 487-8057.

Pat Bailey Accountant i

Letter Number: 497A00048485