# P97000056422

97 JUN 26 PM 1:52

TALLAHASSEE, FLORIDA

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

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SUBJECT:	HBM Tr	ans ZNC.  I corporate name - must includ		, i
	(Proposed	corporate name - must includ		_
			60000222 -06/26/97- *****70.0	-01067014
Enclosed is an original a	nd one(1) copy of the artic	cles of incorporation and a	check for :	•
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: _	HArold	B. Marsh (Printed or typed)	<del>1 </del>	
will wait -		Address Dr.	, ju	
·	TAllahass	ty, State & Zip	312	
	904 3	36 6441		
	Daytim	e Telephone number	Okto	09

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

# ARTICLES OF INCORPORATION

97 JUN 26 PM 1:53

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE TALLAHASSEE. FLORIDA

ARTICLE	I.	NAME
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The name of the corporation shall be:

HBM Trans Inc.

ARTICLE II PRINCIPAL OFFICE

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

2655 W. TUNNESSEL St.

Tallahassee, FG. 32304

ARTICLE III SHARES

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

100 Shares

### INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

HAROID B. MAYSH

801 LAKCHOR DT.

TAlla hasses, FL. 32312

# ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

NAVOID B. Marsh

801 LAKEShore Dr.

TAllahassee, FL.

32312

HB Many

6-24-97

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

6-24.97