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TRANSMITTAL LETTER

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

700002239887--2

-07/16/97--01084--010

*****78.75 *****78.75

SUBJECT: CLASSIC COACHES INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: LINDA CARTER
Name (Printed or typed)

193 OLD NAILS RD
Address

CRAWFORDVILLE FL 32327
City, State & Zip

421-1933
Daytime Telephone number

K.R. JUL 16 1997

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

FILED
97 JUL 16 PM 2:45
RECEIVED
97 JUL 16 PM 2:29
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

PICK UP
7/17/97
10:00 AM

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

CLASSIC COACHES INC

ARTICLE II PRINCIPAL OFFICE

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

185 OLD NAILS RD CRAWFORDVILLE, FL

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LINDA CARTER
193 OLD NAILS RD
CRAWFORDVILLE, FL 32327

ARTICLE V INCORPORATOR

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

LINDA CARTER	KENNETH CARTER
193 OLD NAILS RD	193 OLD NAILS RD
CRAWFORDVILLE, FL	CRAWFORDVILLE, FL

Linda Carter Kenneth Carter
Signature/Incorporator

7-16-97

Date

(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

Linda Carter
Signature/Registered Agent

7-16-97

Date

FILED
97 JUL 16 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA