## TRANSMITTAL LETTER

## P97000084633

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

97 SEP 29 AH 8: 19

٦	LIBERATOR TRUCKING INC.
SUBJECT:	
SUBJECT.	(Proposed comorate name - must include suffix)

200002305812--4 -09/29/97--01074--004 \*\*\*\*\*78.75 \*\*\*\*\*78.75

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:

WILLIAM A. LIBERATOR

Name (Printed or typed)

4029 27 AVE WEST

Address

BRADENTOW, FL 34205

City, State & Zip

941 755 4106

Daytime Telephone number

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



## ARTICLES OF INCORPORATION

97 SEP 29 AM 8: 19

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

The name of the corporation shall be: LIBER ATOR TRUCKING INC
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:
4029 27 Aug West Bradenton, FL 34205
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
500 Shores
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are: WILLIAM A. LIBERATOR
4029 2T Ave West
RRADENTON, FL 34205
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Articles of Incorporation are:
WILLIAM A. LIBERATOR
4029 27 AUC WEST
BRADENTON, FL 34205
Jan A - Son 9-24-97
Signature/Incorporator 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

Signature/Registered Agent

Date