## TRANSPITTA LETTER

97 OCT -2 PH 2: 31

DIVISION OF CORPORATION

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

SUBJECT:	(Proposed/cc	orporate name - must includ	-10/02/31-	-04255 01105008 ?5 *****78.75
			Antonia IO.	O 444444110110
Enclosed is an original a	and one(1) copy of the article	s of incorporation and a	check for :	
\$70.00 Filing Fee	Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	DELOACH TOWN Name (P	rinted or typed)		
_	200 John K	Address	B	
	<i>TALLAHA 55 e</i> City,	e FLORINA State & Zip	323v3	
-	(850) 5 '76 Daytime T	- 4600 elephone number	<del> </del>	

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

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FILED

The undersigned incorporator, for the purpose of forming a corporation under the Florida

Business Corporation Act, hereby adopts the following Act. SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

DELOACH TOWING Co.

ARTICLE II PRINCIPAL OFFICE

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

200 John KNOX Rd - B TALLAMASSEE. FLORIDA, 32303

ARTICLE III SHARES

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

1000

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

SAMES F. Weath and SR.

200 John Knox Rd. B

TALL AHASSEE, FL 32303

ARTICLE V INCORPORATOR

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

JAMES F. Weatherly JR. 200 John Knox Rd. B TALLAGERSER FL 32303

10-2-97 Bate

(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