

# P99000018038

## TRANSMITTAL LETTER

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

200002783172--4  
-02/22/99--01111--018  
\*\*\*\*\*131.25 \*\*\*\*\*87.50

SUBJECT: MIKEL LOGISTICS 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: EDWARD HOBIN  
Name (Printed or typed)

3522 S.E. HYDE CIRCLE  
Address

PORT ST. LUCIE FL 34984  
City, State & Zip

561-336-5516  
Daytime Telephone number

FILED  
99 FEB 22 AM 10:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

REGISTER FEB 25 1999

## 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 I NAME

The name of the corporation shall be:

MIKEL LOGISTICS INC

### ARTICLE II PRINCIPAL OFFICE

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

3522 S.E. HYDE CIRCLE  
PORT ST. LUCIE FL 34984

### ARTICLE III SHARES

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

ONE THOUSAND (1000)

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EDWARD HOBIN  
3522 S.E. HYDE CIRCLE  
PORT ST. LUCIE FL 34984

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**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

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

EDWARD HUBIN  
3522 S.E. HYDE CIRCLE  
PORT ST. LUCIE FL 34984

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

12 day of FEBRUARY, 19 99.

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

Edward Hubin  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 MIKEL LOGISTICS INC

2. The name and address of the registered agent and office is:

EDWARD HOBIN  
(NAME)

3522 S.E. HYDE CIRCLE  
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

PORT ST LUCIE FL 34984  
(CITY/STATE/ZIP)

**FILED**  
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TALLAHASSEE, FLORIDA

*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.*

Edward Hobin  
(SIGNATURE)

2-12-99  
(DATE)