Transmittal Letter

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 ON SECRETARION SIN 8: 42

SUBJECT: <u>ATLANTIC</u> <u>DELIVERY SERVICE</u>, 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: THOMAS S. McELLIGATT	10000281 -03/10/9: *****78	901072018
Name (printed or typed)	2	
9073 CHRYSANTHEMUM DO		-
Address		
BOYNTON BEACH ET 33437		
City, State & Zip		
(561) 737-0250	· \$ 7 2	-
Daytime Telephone Number		

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

AUTHORIZATION BY PHONE TO
CORRECT AUTHORIZATION BY PHONE TO
DATE 3 1649

D. BROWN MAR 1 6 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: ATLANTIC DELIVERY SERVICE, INC.

ARTICLE II: PRINCIPAL OFFICE

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

9073 CHRYSANTHEMUM DR BOYNTON BEACH, FL 33437

ARTICLE III: SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 50

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

9073 CHRYSANTHEMUM DR BOYNTON BEACH, FL 33437

ARTICLE V: INCORPORATOR(S)

See instructions for officers/directors.

The name(s) and street addresses of the incorporator(s) to these Articles of Incorporation is

THOMAS S. McELLIGOTT PRESIDENT 9073 CHRYSANTHEMUM DR. BOYNTON BEACH, FL 33437

The undersigned incorporator(s) has(have) executed these Articles of I	ncorporation	this
(An additional article must be added if an effective date is requested.)		

Thomas S. M. Allegoto 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.

Filing Fee \$70.00

.:≀y ___

tion is

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:

ATLANTIC DELIVERY SERVICE, INC.

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

(Name)
9073 CHRYSANTHEMUM DR.
(P.O. Box or Mail Drop Box NOT Acceptable)
BOYNTON BEACH, FL 33437
(City/State/Zip)

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) S-8-99 (Date)

DIR

BU:

00 MAR 10 AM 8: 42