1000057550 FILED 99 JUN 23 PM

TRANSMITTAL LETTER

99 JUN 23 PM 6: 39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

300002912943--1 -06/23/99-01030-017 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

JECT:	Keith Hamilton Loader Service IN (Proposed corporate name - must include suffix)		
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		,	
osed is an original a	nd one(1) copy of the artic	eles of incorporation and a	check for:
\$70.00	☑ \$78.75	□\$78.75	□ \$87.50
Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	Filing Fee, Certified Copy
	Status		& Certificate
		ADDITIONAL COPY REQUIRED	

FROM: Keith Hamilton

Name (Printed or typed)

1501 Decker Ave Unit 307

Address

Stuart FL 34994

City, State & Zip

561-287-1984

Daytime Telephone number

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

## 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:
KEITH HAMILTON LOADER SERVICE INC.

ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
1501 DECKER AVE UNIT 307

STUART FL 34994

ARTICLE III SHARES

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

Five Hundred (500) shares of common stock with a par value of One Dollar (\$1.00) per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent is:

KEITH HAMILTON 1501 Decker Ave Unit 307 Stuart Fl 34994

ARTICLE V INCORPORATOR

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

KEITH HAMILTON 1501 DECKER AVE UNIT 307 STUART FL:34994

Signature/Incorporator

6-21-99

Date

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 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

6-21-99

Date

99 JUN 23 PM 6: 39
SECRETARY OF STATE A