

TRANSMITTAL LETTER

P 9 9 0 0 0 0 5 8 2 2 0

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

800002914468--2
-06/24/99--01078--008
*****87.50 *****87.50

SUBJECT: TAMPA BAY COURIERS, 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 of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: PAUL E. COX
Name (Printed or typed)
12413 PEPPERFIELD DRIVE
Address
TAMPA, FL 33624
City, State & Zip
(813) 265-0600
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUN 24 AM 11:04

FILED

F. CHESSEB JUN 28 1999

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:

TAMPA BAY COURIERS, INC.

ARTICLE II PRINCIPAL OFFICE

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

MAILING: P.O. BOX 20004
TAMPA, FL 33622-0004 PHYSICAL: 2103 BLIND POND AVE
LOT 2, FL 33549

ARTICLE III SHARES

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

10,000 TEN THOUSAND

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

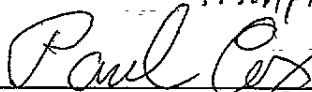
The name and Florida street address of the initial registered agent are:

JIMMIE AMORELLI
2103 BLIND POND AVE
LOT 2, FL 33549

ARTICLE V INCORPORATOR

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

PAUL E. COX
12413 PEPPERFIELD DRIVE
TAMPA, FL 33624



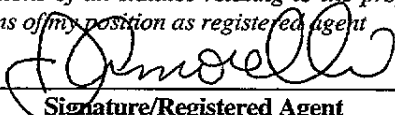
Signature/Incorporator

6-21-99

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

6-21-99

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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