

TRANSMITTAL LETTER

P99000078163

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

000002973570--1
-08/30/99--01086--011
*****78.75 *****78.75

SUBJECT: TRAYLOR TRANSPORTS INC.
(Proposed corporate name - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 AUG 30 PM 2:42

FILED

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: MS. CHEQUETA R. TRAYLOR
Name (Printed or typed)

11450 S.W. 117 COURT
Address

MIAMI, FLORIDA 33186
City, State & Zip

(786)242-2666 or (305)854-1341
Daytime Telephone number

SEP 1 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:

TRAYLOR TRANSPORTS INC.

ARTICLE II PRINCIPAL OFFICE

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

11450 S.W. 117 COURT
MIAMI, FLORIDA 33186

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: CHEQUETA R. TRAYLOR

11450 S.W. 117 COURT
MIAMI, FLORIDA 33186

ARTICLE V INCORPORATOR

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

MS. CHEQUETA R. TRAYLOR
11450 S.W. 117 COURT
MIAMI, FLORIDA 33186

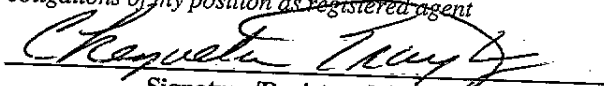

Signature/Incorporator

8-24-99

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

8-24-99

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 AUG 30 PM 2:42

FILED