

P12000020487

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
TRI-COLOR PURSUIT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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February 29, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE CORPORATE KIT COMPANY

SUBJECT: TRI-COLOR PURSUIT, INC.
REF: W12000011741

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please accept our apology for failing to mention this in our previous letter.

You must list at least one incorporator with a complete business street address.

If you have any further questions concerning your document, please call (850) 245-6052.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

FAX Aud. #: H12000051336
Letter Number: 412A00008192

P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

TRI-COLOR PURSUIT INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

5521 N University Dr Ste 203
Coral Springs FL 33067

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

P/D Thomas D Olson
5521 N University Dr Ste 203
Coral Springs FL 33067

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Thomas D Olson
5521 N University Dr Ste 203
Coral Springs FL 33067

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Thomas D. Olson
5521 N. University DR Ste #203
Coral Springs, FL 33067

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

2-24-12

Date

Signature/Incorporator

2-24-12

Date

SECRETARY OF STATE
TALLAHASSEE, FL 09101

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