

P00000035617

TRANSMITTAL LETTER

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

400003195844--6
-04/04/00--01035--004
*****78.75 *****78.75

SUBJECT: DECKLIFTS, 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: DAVID A. MITCHELL
Name (Printed or typed)

1405 W. OLIVE ST
Address

LAKELAND FL 33815
City, State & Zip

504 807-3278
Daytime Telephone number

FILED
00 APR -4 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

8/4/7

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:
Decklifts, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
*1405 West Olive Street
Lakeland, FL 33815*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
The manufacture of material hoist

ARTICLE IV SHARES

The number of shares of stock is:
100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is:
*David A. Mitchell
1405 West Olive Street
Lakeland, FL 33815*

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:
*David A. Mitchell
1405 West Olive Street
Lakeland FL 33815*

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

DA Mitchell

Signature/Registered Agent

DA Mitchell

Signature/Incorporator

4/3/00

Date
4/3/00

Date

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TALLAHASSEE, FLORIDA