

# TRANSMITTAL LETTER

P000000 98708

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

500003419255--4  
-10/09/00--01078--006  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: LTS INCORPORATED  
(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: JEFF WOOD  
Name (Printed or typed)

165 WOODCREEK DR. NO.  
Address

SAFETY HARBOR, FL. 34695  
City, State & Zip

(927) 578-6725  
Daytime Telephone number

FILED  
00 OCT 19 PM 2:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

W-24518  
OK 10/10





FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

October 10, 2000

JEFF WOOD  
165 WOODCREEK DR. NORTH  
SAFETY HARBOR, FL 34695

SUBJECT: LTS INCORPORATED  
Ref. Number: W00000024512

We have received your document for LTS INCORPORATED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6878.

Alan Crum  
Document Specialist

Letter Number: 500A00053448



State Of Florida  
Articles of Incorporation  
Of

Lease Taxation Services Incorporated

FILED  
00 OCT 19 PM 2:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I: The corporate name that satisfies the requirement of Section 607.0401 is: Lease Taxation Services Incorporated.

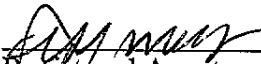
ARTICLE II: The street address of the principal office of the corporation and its mailing address is: 165 Woodcreek Drive North, Safety Harbor, Florida 34695.

ARTICLE III: The number of shares the corporation is authorized to issue is One Thousand (1,000) each with the par value of One Dollar and no Cents (\$1.00).

ARTICLE IV: The street address of the initial registered office of the corporation is 165 Woodcreek Drive North, Safety Harbor, Florida 34695 and the name of its original registered agent at such address is Jeffrey T. Wood.

ARTICLE V: The name and address of each incorporator is: Jeffrey T. Wood  
165 Woodcreek Drive North, Safety Harbor, Florida 34695.

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

  
\_\_\_\_\_  
Registered Agent

10/16/00  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Incorporator

10/16/00  
\_\_\_\_\_  
Date