# P010000000381

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

SUBJECT: Proposed corporate name - must include suffix)

500003555875--3 -01/19/01--01067--024 \*\*\*\*236.25 \*\*\*\*\*\*78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$	70.	00

\$78.75

Filing Fee Filing Fee

& Certificate of Status

**△\$78.75** 

Filing Fee

& Certified Copy

\$87.50

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: The best Lyans	
FROM: Sobert Lyon S Name (Printed or typed)	
1403 N Armening Store	
Thunga The 33612	REC OJAN CEPARIN VISION O
Z City, State & Zip	TO PA
1-613-936-9556 Daytime Telephone number	F STATE PLORIDA

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 1 NAME

The name of the corporation shall be:

Bug Tug of Tampa, Inc.

### ARTICLE 11 PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 612 Indiana Ave
Nokomis, FL. 34275

ARTICLE 111 SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
50 Shares of common stock @ \$ 10.00 per share

#### ARTICLE 1V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address:

Robert Lyons

9403 N. Armenia Ave.

Tampa, FL. 33612

## ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of incorporation are: Marjorie J. Mc Coole 612 Indiana Ave
Nokomis, FL. 34275

Marjoin J. The ook Signature/Incorporator

/2-20-00 Date

(An additional article must be added if an affective 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 status 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

Date