POIDOOD22007

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

Tallahassee, F.	L 32314	5 00		•
SUBJECT:	PROTECTIVE POLYMERS, TWC. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)	ECHETAFY OF STATE	HAR -1 PM 1:45	APPROVED 1

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

\$87.50

Filing Fee & Certified Copy Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	J.W. GRANT		
	Name (Printed or typed)	DIV	
	932 SUMMERBROOKE DR.	1310 1510	7
	Address	MAR C)
	TALLAHASSER, FL 32312 City, State & Zip	CORPO	
	(850)894-2050	I PH I: 44 CORPORATION	j
	Destine Telephone number		

500003791545--4 -03/01/01--01093--001 *****80.00 *****78.75

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



AKTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 6	521, F.S. (Prof	it)			
ARTICLE I NAME The name of the corporation shall be:				-	
PROTECTIVE POLYMERS,	Inc.			••	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	· · · · · · · · · · · · · · · · · · ·		 		÷
932 SUMMERBROOKE DRIV					
TALLAHASSRE, FL 32312			- -	Ze 0	
ARTICLE III PURPOSE		·			Ą
The purpose for which the corporation is organize	ed is:	,		- 1 - 1 - 1 - 1 - 1 - 1 - 1	
COMMERCIAL BUSINESS					<u>9</u> 69
				PS A	8
ARTICLE IV SHARES The number of shares of stock is:	<u></u> 			MAR - PM : 45 ECRETARY OF STATE LLAHASSEE, FLORIDA	
100					
ARTICLE V INITIAL OFFICERS/DIRECTION The name(s) and address(es):	CTORS (op)	tional)			
ARTICLE VI REGISTERED AGENT The name and Florida street address of the register.	tered agent is:	•	um e		
J. W. GRANT	ered agent is.		**		
932 SummerBeooke DRIVE					
TALLAHASSER, FL 32312		,	:		
ARTICLE VII INCORPORATOR	1				
The <u>name and address</u> of the Incorporator is:	ਦ ਂ-	· •			
J.W. GRANT	-				
932 Jummerbrooke Drive			5.TT		
TALLAHASSEE, FL 32312 **********************************	<u> </u>				
			*****		****
Having been named as registered agent to accept service of pertificate, I am familiar with and accept the appointment as	process for the a registered agent	bove stated co and agree to c	rporation at the act in this capac	e place designatea citv	l in this
Albrunt	<u>-</u>		3-1-	-:0/	
Signature/Registered Agent		12	Date		
What	<u> </u> =-	1	=±. "⊃ /	n /	

Signature/Incorporator