TRANSMITTAL LETTER

P010000 51516

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

SUBJECT:

TT Hool Refigerated Convier Services Inc.
(Proposed corporate name - must include suffix)

800004242628---07 -05/17/01--01096--007 *****78.75 ******78.75

Enclosed is an	original an	d one (1)	copy of the	articles o	f incorporation	and a	check for:
			1 7		Α		

\$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: Sherry Govett.
Name (Printed or typed)

4508 Lace Cascado Ct

Lutz FL 33549 City, State & Zip

S13 874.7079

Daytime Telephone number

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)		
ARTICLE 1 NAME The name of the corporation shall be: "Keep IT Kool Rebrigerated Courier Service In	<u>C</u> .	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:		
4508 Lace Cascade Ct Lutz FL 33549	.,	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: TO Provide Concret Service	. 	
ARTICLE IV SHARES The number of shares of stock is:	01 MA	
ARTICLE V INITIAL OFFICERS/DIRECTORS The name(s) and address(es): Rager white-owner Sherry Garrett Office marager	MAY 17 PM 8: 19	FILED
ARTICLE VI REGISTERED AGENT The name and Florida street address registered agent are: Sherry Garlett - 4508 Lace Cascade Ct Lutz FL 3359		
ARTICLE VII INCORPORATOR The name and address of the Incorporator are: Poger white -4508 Lace Cascade Ct. Lutz FL 33549 ***********************************	·****	·
Having been named as registered agent and to accept service of process for the above stated corporation at the place of this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with an obligations of my position as registered agent. Signature Registered Agent Date	lesignat comply	y wun

Signature/Incorporator

Date