

TRANSMITTAL LETTER

P010000097842

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

APPROVED
AND
FILED
01 OCT -8 PM 2:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: PUBLIC SERVICE PROVIDERS ASSOCIATION,
(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: LANCE P. NORRIS
Name (Printed or typed)

400004627494--B
-10/08/01-01082-003
157.50 **78.75

RECEIVED

01 OCT -8 PM 2:17

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2292 WEDNESDAY ST. SUITE 2
Address

TALLAHASSEE, FL 32308
City, State & Zip

850-205-6000
Daytime Telephone number

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

10/8

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:

PUBLIC SERVICE PROVIDERS ASSOCIATION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2292 WEDNESDAY ST. SUITE 2
TALLAHASSEE, FL 32308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

LANCE C. NORRIS, DIRECTOR
2292 WEDNESDAY ST. SUITE 2
TALLAHASSEE, FL 32308

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

LANCE C. NORRIS
2292 WEDNESDAY ST. SUITE 2
TALLAHASSEE, FL 32308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LANCE C. NORRIS
2292 WEDNESDAY ST. SUITE 2
TALLAHASSEE, FL 32308

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

Signature/Registered Agent

Date

10-8-01

Signature/Incorporator

Date

10-8-01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 OCT -8 PM 2:26

APPROVED
AND
FILED