# Po2 000024478

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

900005026499---4 -02/28/02--01046--004 \*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed are an original and one (1) copy of the article \$70.00 \$78.75	S78.75 S87.50 Filing Fee Filing Fee & Certified Copy Certified Copy & Certifical Fee Status STATE Status STATE STA
FROM: Thomas ZANNUCCI From Same (Printed or typed)  Name (Printed or typed)  6377 SW MOORE ST.	

Address

Daytime Telephone number

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

2/0,15

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## *NAME*

The name of the corporation shall be:

TJ'S Equipmender ALLAHOSE

# PRINCIPAL OFFICE

The principal place of business/mailing address is: 6377 5 w moor & ST Palm City 71. 34990

#### *ARTICLE III* **PURPOSE**

The purpose for which the corporation is organized is:

Equipment SAles

## SHARES

The number of shares of stock is:

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Thomas ZANNUCCI

6377 SW MOORE ST

Polm City FL 34990

# REGISTERED AGENT

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

Thomas ZANNUCC! 6377 SW MOORES Polm city FL 34990

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Thomas ZANNUCCI 63775W moorest

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

Signature/Incorporator

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2-25-02