

PO2000123011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2002 NOV 14 AM 10:36

STATE  
FALL ARIZONA

g 11/19/02

## TRANSMITTAL LETTER

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2002 NOV 14 AM 10:36

SECRETARY OF STATE  
TALLAHASSEE FLORIDADepartment of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314SUBJECT: IST PRODUCTS, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

|            |                                       |
|------------|---------------------------------------|
| \$70.00    | \$78.75                               |
| Filing Fee | Filing Fee<br>& Certificate of Status |

|                                |   |
|--------------------------------|---|
| \$78.75                        | \$87.50   |
| Filing Fee<br>& Certified Copy | Filing Fee,<br>Certified Copy<br>& Certificate of<br>Status |
| ADDITIONAL COPY REQUIRED       |   |

FROM: Shon Leuci  
Name (Printed or typed)1546 BERING COURT  
AddressPalm Harbor, FL 34683  
City, State & Zip727-784-3661  
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)

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**ARTICLE I NAME**

The name of the corporation shall be:

IST PRODUCTS, INC.

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1546 BERING COURT  
Palm Harbor, FL 34683

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Sale of Products + Services

**ARTICLE IV SHARES**

The number of shares of stock is:

500

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

Shon R. Leuci - President  
Thomas M. Leuci - Vice President

**ARTICLE VI REGISTERED AGENT**

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

Shon R. Leuci  
1546 Bering Court  
Palm Harbor, FL 34683

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Shon R. Leuci  
1546 Bering Ct.  
Palm Harbor, FL 34683

\*\*\*\*\*  
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

Shon R. Leuci  
Signature/Registered Agent

11/12/02  
Date

Shon R. Leuci  
Signature/Incorporator

11/12/02  
Date