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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

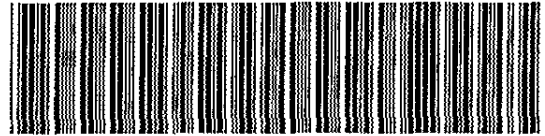
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Tri-County Process Service & Courier Corporation
(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
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: Raul Pedrero
Name (Printed or typed)

8004 N.W. 154 Street Suite 377
Address

Miami Lake FL 33016
City, State & Zip

786-277-9899
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 I NAME

The name of the corporation shall be:

Tri-County Process Service & Courier Corporation.
8004 N.W. 154th Street
Suite #377 Miami Lake Fla 33016

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8004 N.W. 154th Street
Suite #377
Miami Lake Fla 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation for Profit

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Raul Pedrero (C.E.O.)
8004 N.W. 154th Street
Suite #377

Miami Lake Fla 33016

ARTICLE VI REGISTERED AGENT

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

Raul Pedrero
8004 N.W. 154th Street
Suite #377 Miami Lake Fla 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Raul Pedrero
8004 N.W. 154th Street
Suite #377 Miami Lake Fla 33016

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

Signature/Incorporator

Date

03 JAN 21 AM 10:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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