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TRANSMITTAL LETTER

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

(TROT USED CORT ORATE HAME - MOST INCOORSESSET IN				
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Tommy Hi	Printed or typed)		
8038 BUSFAIO AVENUE				
	Jacksonville, city.	FL 3000 State & Zip	<u>8</u>	
	904- <u>703</u> -	3614 elephone number		

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

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
The name of the corporation shall be:	TAS C
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 8038 Buffalo Avenue Jacksonville FL 32208 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	D3 JAN 27 PH 1: 13 ECRETARY UF STAIL ELAHASSEE FLORIDA
ARTICLE IV SHARES The number of shares of stock is: 10,000	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): TOMMY Hill President 8038 Buffalo Avenue Jacksonville, FL 32208	-
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Tommy Hill 8038 BUFFALO AUCNUE JACKSONVILLE, FL 32208 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Tommy Hill 8038 BUFFALO AUCNUE Jackson Ville, FL 32208	
Having been named as registered agent to accept service of process for the above stated corporate certificate, I am familiar with and accept the appointment as registered agent and agree to act in the	ion at the place designated in thi his capacity
	1-18-03
Signature/Registered Agent	Date

Signature/Incorporator