P0300061449

(Requestor's Name)		
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	⇒#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



400019572534

05/29/03--01014--013 **87.50

03 MAY 29 PN 3: 25 SECRETARY OF STATE TALLAHASSEE, FLORIDA

 \sim

m 10/4

TRANSMITTAL LETTER

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

Enclosed are an origin	nal and one (1) copy of the arti-	cles of incorporation and	l ā 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 CO	PY REQUIRED	
FROM: Tina Beiger Name (Printed or typed)				
1333 College Parkway Suite 104				
Gulf Breeze, FL 32503 City, State & Zip				
832-015-1870 Daytime Telephone number				

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

	FILED
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: Triton PMS, Inc.	03 MAY 29 PH 3: 25 SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1333 College Parkway Ste Gulf Breeze, FL 32563 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To transact any and all Lawful corporations may be incorporated. ARTICLE IV SHARES The number of shares of stock is: 1,000	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): John Bejaer - President Tina Bejger - Vice president	
Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree	
Signature/Registered Agent	<u> </u>

Signature/Incorporator