

P03000070475

(Requestor's Name)

(Address)

(Address)

(City/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



700020572257

06/23/03--01037--005 **78.75

FILED

03 JUN 23 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Tip Top Moving, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

Ain Karner

Name (Printed or typed)

324 Compo Rd South

Address

Westport, CT 06880-6517

City, State & Zip

(203) 222-2236

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: Tip Top Moving, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 5527 Shaddelee Ln W
Fort Myers, FL 33919

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any activity within the purposes for which corporations may be organized under Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE IV SHARES

The number of shares of stock is: One thousand, (1,000) all of which shall be without par value.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): Peeter Madisson, President
5527 Shaddelee Ln W, Fort Myers, FL 33919

Ingre Madisson, Vice President
5527 Shaddelee Ln W, Fort Myers, FL 33919

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: Ingre Madisson
5527 Shaddelee Ln W,
Fort Myers, FL 33919

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Ain Karner
324 Compo Rd South
Westport, CT 06880-6517

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

Ingre madisson
Signature/Registered Agent

06/15/03
Date

Ain Karner
Signature/Incorporator

06/12/03
Date

FILED
03 JUN 23 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA