

AD3000094541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

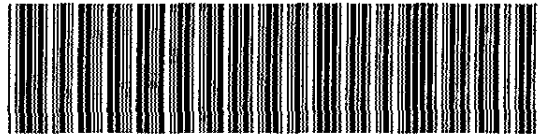
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100021911781

08/08/03--01079--001 **128.75

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 AUG 28 PM 3:59

TRANSMITTAL LETTER

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

SUBJECT: _____

T. T. S. 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
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: _____

TREVOR W. SMALL

Name (Printed or typed)

1170 LEBANON CT

Address

SANFORD FLORIDA 32771

City, State & Zip

HO 7-321-4891

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 11, 2003

TREVOR W. SMALL
1170 LEBANON CT.
SANFORD, FL 32771

SUBJECT: T.T.S., INC.
Ref. Number: W03000022718

RECEIVED
03 AUG 28 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for T.T.S., INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is M33987.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Document Specialist
New Filings Section

Letter Number: 403A00045738

*I HAVE ADDED ANOTHER LETTER
TO MY COMPANY'S ORIGINAL NAME
THANK YOU FOR YOUR HELP.*

CERTIFICATE OF DOMESTICATION

The undersigned, TREVOR W. SMALL, PRESIDENT
(Name) (Title)
of T. T. T. S. INC. a foreign corporation
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was 12th NOVEMBER, 1991.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was NEW YORK.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was T. T. S. INC..
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is T. T. T. S. INC.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was 509 CARY AVE STATEN ISLAND N.Y. 10310
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am PRESIDENT, of T. T. T. S. INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 6 day of AUGUST, 2003.

Trevor W. Small
(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE: T. T. T. S. inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

1170 HERBAMON CT.
SANFORD FL 32771

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

TRUCKING

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

10,000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

TREVOR SMALL
1170 HERBAMON CT.
SANFORD 32771

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS:

TREVOR SMALL
1170 HERBAMON CT.
SANFORD FL 32771

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

TREVOR SMALL
1170 HERBAMON CT.
SANFORD FL 32771

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

Trevor Small
Signature/Registered Agent

6 August 2003
Date

Trevor Small
Signature/Incorporator

6 August 2003
Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 AUG 28 PM 3:59