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SECRETARY OF STATE

# TRANSMITTAL LETTER

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

SUBJECT: S.1.	Hamilton, Inc.			
<del></del>	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	l a check for:	<u></u>
ET AMO OO	Diego ac	D 620 75	[ <b>]</b> 207 50	1
\$70.00	□ \$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy	1
	& Cerunicate of Status	& Counted Copy	& Certificate of	. 🖠
			Status	1
		ADDITIONAL CO		
		<u> </u>		J
FROM:	Scott T. Hamilton			
rkow	Name	(Printed or typed)	,	· * * ****
	11319 N 50th Street Apt #	: 5		
		Address		· · · · · · · · · · · · · · · · · · ·
	Tampa, Florida 33617			-
	City, State & Zip			
	813-477-1666			
	Daytime 1	elephone 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)

FILED

### ARTICLE I NAME

The name of the corporation shall be: S.T. Hamilton, Inc.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 11319 N 50th Street Apt # 5
Tampa, Florida 33617

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Service Business for Profit

#### ARTICLE IV SHARES

The number of shares of stock is:

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Scott T. Hamilton - President 11319 N 50th Street Apt# 5 Tampa, Florida 33617

#### ARTICLE VI REGISTERED AGENT

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

Rhonda Lynn Brainard 2304 E Fletcher Avenue Tampa, Florida 33612

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Scott T. Hamilton 11319 N 50th Street - Apt #5 Tampa, Florida 33617

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

OB-29-03

Signature/Incorporator

Date