

P030000107902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

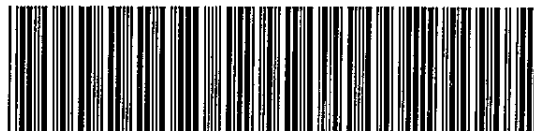
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: Truly INNOVATIVE PRODUCTS, 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:

MICHAEL G. McDONALD

Name (Printed or typed)

418 LAUREN BURG LANE

Address

OCFEE, FL 34761-4794

City, State & Zip

321-276-4860

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: *TRULY INNOVATIVE PRODUCTS, INC*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: *418 LAURENBURG LANE  
OCLOEE, FL  
34761-4794*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: *TO ENGAGE IN ANY AND  
ALL LAWFUL BUSINESS*

**ARTICLE IV SHARES**

The number of shares of stock is: *60,000*

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

*MICHAEL G. McDONALD  
418 LAURENBURG LANE  
OCLOEE, FL 34761-4794  
PRESIDENT & SECRETARY*

**ARTICLE VI REGISTERED AGENT**

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

*MICHAEL G. McDONALD  
418 LAURENBURG LANE  
OCLOEE, FL 34761-4794*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*C. DARYL DAVIS, SR.  
482 VERACRUZ BLVD  
INDIANTHIC, FL 32903*

\*\*\*\*\*

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

*Michael G. McDonald*  
\_\_\_\_\_  
Signature/Registered Agent

*9-23-03*  
\_\_\_\_\_  
Date

*C. Daryl Davis, Sr.*  
\_\_\_\_\_  
Signature/Incorporator

*9/23/03*  
\_\_\_\_\_  
Date

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