

PO3000/45586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

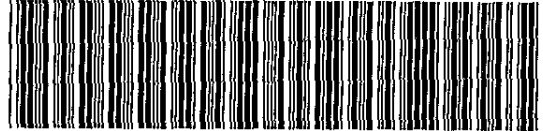
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

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

SUBJECT: Trims Unlimited, 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: William L. Mock

Name (Printed or typed)

253 North Boulevard

Address

Saint Augustine, FL 32095

City, State & Zip

(904) 687-9158

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:

Trims Unlimited, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

253 North Boulevard, Saint Augustine, FL 32095

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purposes of this corporation shall be to engage in any lawful act or activity for which corporations may be organized under the business corporation law.

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

William L. Mock, 253 North Boulevard, Saint Augustine, FL 32095, President, Treasurer, and Secretary

## ARTICLE VI REGISTERED AGENT

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

William L. Mock, 253 North Boulevard, Saint Augustine, FL 32095

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

William L. Mock, 253 North Boulevard, Saint Augustine, FL 32095

\*\*\*\*\*  
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

William L. Mock

Signature/Registered Agent

11-26-03

Date

William L. Mock

Signature/Incorporator

11-26-03

Date

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