

P03000153238

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

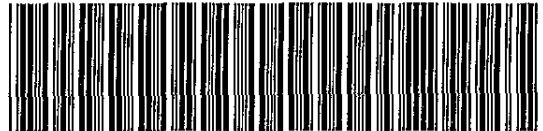
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TALLAHASSEE FLORIDA

12-16-03

## TRANSMITTAL LETTER

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

SUBJECT: Michael Tate, 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 Tate  
Name (Printed or typed)  
5678 Lisa Lyn Road  
Address  
Keystone Heights FL 32656  
City, State & Zip  
352-473-7506  
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:

Michael Tate, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

5678 Lisa Lynn Road Keystone Heights, Fl 32656

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Flooring, Construction

**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):

Michael Tate, 5678 Lisa Lynn Road, Keystone Heights, Fl 32656  
President

Emmett Chester Tate, 2555 Cotillion Road, Jax Fl 32211, Vice Presi

**ARTICLE VI REGISTERED AGENT**

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

Michael Tate 5678 Lisa Lynn Road, Keystone Heights, Fl 32656

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Michael Tate, 5678 Lisa Lynn Road, Keystone Heights, Fl 32656

\*\*\*\*\*

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 A Tate  
Signature/Registered Agent

12-505  
Date

Michael A Tate  
Signature/Incorporator

12-503  
Date

FILED  
2009 DEC 11 PM 3:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA