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## TRANSMITTAL LETTER

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

SUBJECT: Pitts Production and Piston Sound
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an origin	nal and one(1) copy of the artic	cles of incorporation and a	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED

FROM:
Lean Pifts
Name (Printed or typed)

1163 Vilas Ave
Address

Sarasofa, FL, 34237
Qity, State & Zip

941-954-4506
Daytime Telephone number

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

The name of the corporation shall be:		
Pitto Production and Piston Sound Inc		
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  [[43 Vilar Ave]	-	w ·
Sarasota, Florida 34237	O4 C	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	JAN 23 AM II: 55 CKEVARY OF STATE LAHASSEE, FLORIDA	
ARTICLE IV SHARES The number of shares of stock is:	55 ATE RIDA	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):		*
Leon Pitts President Mildred Randall Vice President Sec		<u></u>
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is: Leon Pitt	ts	
1163 Vilas Ave Sarasota, FL.		<u>.</u>
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is: Leon Pitts		
1163 Vilar Aue, Sarasoto, FL. 34237 ************************************	*****	********
Having been named as registered agent to accept service of process for the above stated corporation certificate, I am familiar with and accept the appointment as registered agent and agree to act in the		signated in this
Signature/Registered Agent Date	-23-200 e	<u> </u>
Signature/Incorporator Date	-2 3-20 te	04

**ARTICLES OF INCORPORATION**In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)