

P040000014433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

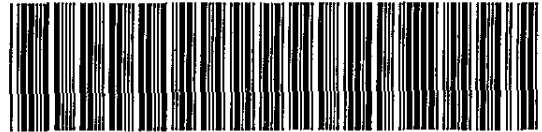
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04 JAN 14 PM 4:02  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

1/23/04

## TRANSMITTAL LETTER

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

SUBJECT: BAY DISTRIBUTING, 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: Roger L Lehnertz

Name (Printed or typed)

36750 U. S. Hwy 19 N #2987

Address

Palm Harbor FL 34684

City, State & Zip

727 945 8508

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:  
BAY DISTRIBUTING ,INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
36750 U. S. Highway 19 N #2987  
Palm Harbor, Fl 34684

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
Sales and distribution of various automotive and industrial products.

### ARTICLE IV SHARES

The number of shares of stock is:  
5000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Roger L Lehnertz 36750 U. S. Hwy 19 N #2987, Palm Harbor, Fl 34684 President  
Linda Joannette 36750 U. S. Hwy 19 N #2987 Palm Harbor, Fl 34684 Secretary

### ARTICLE VI REGISTERED AGENT

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

Roger L Lehnertz 36750 U. S. Hwy 19 N #2987, Palm Harbor, Fl 34684


### ARTICLE VII INCORPORATOR

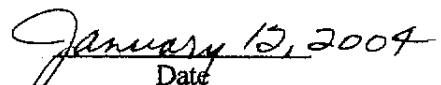
The name and address of the Incorporator is:

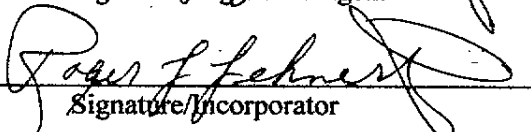
Roger L Lehnertz 36750 U. S. Hwy 19 N #2987, Palm Harbor, Fl 34684

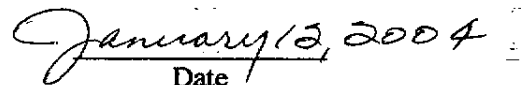
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA