

P04000121592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

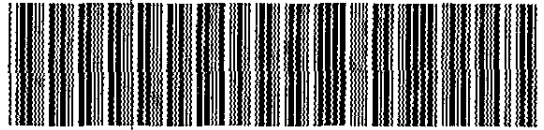
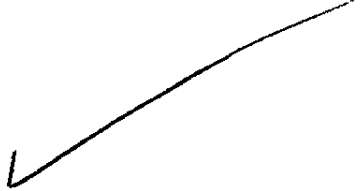
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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08/23/04--01041--004 **78.75

FILED
04 AUG 23 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08/23

TRANSMITTAL LETTER

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

SUBJECT: ALPHA PALLETS INC

(Proposed corporate name- must include suffix)

Enclosed is 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**

FROM: ALPHA PALLETS INC

**Name (Printed or typed)
708 LOMA LINDA COURT**

**Address
BRANDON, FL 33511**

**City, State & Zip
813 299-4608**

Daytime Telephone Number

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, Hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:
ALPHA PALLETS INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
708 LOMA LINDA CT
BRANDON, FL 33511

ARTICLE III SHARES

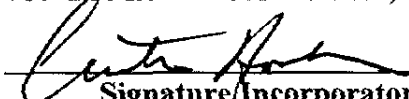
The number of shares of stock that this corporation is authorized to have outstanding
at any one time is: 100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
CURTIS HOOKER
708 LOMA LINDA COURT, BRANDON, FL 33511

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:
CURTIS HOOKER
708 LOMA LINDA COURT, BRANDON, FL 33511



Signature/Incorporator

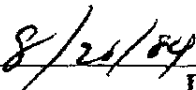


Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent



Signature/Registered Agent



Date

FILED
04 AUG 23 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA