

PO4000172006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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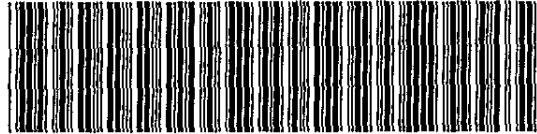
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
04 DEC 27 AM 9:11

me 12/28

## TRANSMITTAL LETTER

ATX1

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

SUBJECT:

A & T, 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:

A & T, INC.

Name (Printed or typed)

8304 DAHLIA Ave

Address

Tampa, FL 33619

City, State &amp; Zip

813-493-2778

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

RECEIVED

04 DEC 27 AM 10:53

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

November 19, 2004

A. & T., INC.  
8304 DAHLIA AVENUE  
TAMPA, FL 33619

SUBJECT: A. & T., INC.  
Ref. Number: W04000042712

We have received your document for A. & T., INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

An effective date may be added to the Articles of Incorporation if a 2005 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Document Specialist  
New Filings Section

Letter Number: 704A00066049

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of corporation shall be:

*Anton & Tyron, Inc.*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

8304 DAHLIA AVE.

Tampa, Florida 33619

**ARTICLE III PURPOSE**

The purpose for which the corporation is organizes is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:

10,000

**ARTICLE V INITIAL OFFICERS AND/ OR DIRECTORS**

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

ANTON HERNANDEZ, PRESIDENT

TYRON FLOWERS, V/PRESIDENT

8304 DAHLIA AVE.

TAMPA,FLORIDA 33619

**ARTICLE VI REGISTERED AGENT**

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

ANTON HERNANDEZ

8304 DAHLIA AVE.

Tampa,Florida 33619

**ARTICLE VII INCORPORATOR**

The Name and Address of the Incorporator is:

ANTON HERNANDEZ

8304 DAHLIA AVE, TAMPA, FL.33619

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
04 DEC 27 AM 9:11

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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.

*Anton Hernandez*  
\_\_\_\_\_  
Signature /Registered Agent

*11-14-04*  
\_\_\_\_\_  
Date

*Anton Hernandez*  
\_\_\_\_\_  
Signature /Incorporator

*11-14-04*  
\_\_\_\_\_  
Date