

P05000065456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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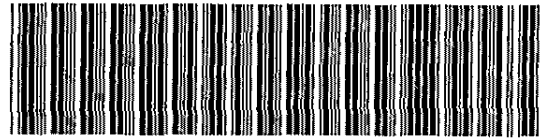
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

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

**SUBJECT:** Auction Tampa Bay, 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:** Troy Lucas

\_\_\_\_\_  
Name (Printed or typed)

8544 N Dale Mabry Hwy

\_\_\_\_\_  
Address

Tampa, FL 33614

\_\_\_\_\_  
City, State & Zip

813-933-8600

\_\_\_\_\_  
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:

Auction Tampa Bay, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8544 N Dale Mabry Hwy  
Tampa, FL 33614

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida.

## ARTICLE IV SHARES

The number of shares of stock is:

SEVEN THOUSAND FIVE HUNDRED (7,500) each having the par value of ONE DOLLAR (\$1.00)

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President: Troy Lucas  
Vice President: Troy Lucas  
Secretary: Sharon Henson  
Treasurer: Sharon Henson

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Troy Lucas  
8544 N Dale Mabry Hwy  
Tampa, FL 33614

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Troy Lucas  
8544 N Dale Mabry Hwy  
Tampa, FL 33614

\*\*\*\*\*

*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

FILED  
05 MAY -2 AM 9:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA