

PD5000/09439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

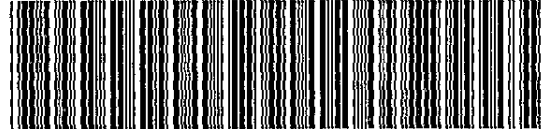
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
05 AUG - 8 AM 10:47

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8/8

W05-32469

## TRANSMITTAL LETTER

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

**SUBJECT:** TRIAD, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Tina Rallo

Name (Printed or typed)

1790 Brookshire Circle

Address

West Melbourne, FL 32904

City, State & Zip

(321)676-4743

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

05 AUG -8 AM 55

DEPARTMENT OF  
OF CORPORATIONS  
TALLAHASSEE, FL

July 6, 2005

TINA RALLO  
1790 BROOKSHIRE CIRCLE  
WEST MELBOURNE, FL 32904

SUBJECT: TRIAD, INC.  
Ref. Number: W05000032469

We have received your document for TRIAD, INC. and your check(s) totaling \$78.75. 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.**

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) 245-6879.

Ruby Dunlap  
Regulatory Specialist  
New Filings Section

Letter Number: 205A00044863

**ARTICLES OF INCORPORATION**

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 AUG -8 AM 10:47

**ARTICLE I NAME**

The name of the corporation shall be:

TRI-R3, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1790 Brookshire Circle  
West Melbourne, FL 32904

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ARTICLE IV SHARES**

The number of shares of stock is:

20,000

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

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

Tina Rallo  
1790 Brookshire Circle  
West Melbourne, FL 32904  
President

Carol Rallo  
1790 Brookshire Circle  
West Melbourne, FL 32904  
Secretary

**ARTICLE VI REGISTERED AGENT**

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

Tina Rallo  
1790 Brookshire Circle  
West Melbourne, FL 32904

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Tina Rallo  
1790 Brookshire Circle  
West Melbourne, FL 32904

\*\*\*\*\*  
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