

705000153548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Freda McKnight GAVE
AUTHORIZATION BY PHONE TO
CORRECT Articles VI + VII
DATE 11/18/05
DOC. EXAM MRD

Office Use Only



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11/17/05--01020--009 **87.50

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 NOV 17 PM 4:42

MRD
11/18

COVER LETTER

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

SUBJECT: Tripple S Waste Services 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Sean R. Gosine

Name (Printed or typed)

8922 NW 181 Street

Address

Miami Florida 33018

City, State & Zip

305-362-1337

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)

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TALLAHASSEE, FLORIDA

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ARTICLE I NAME

The name of the corporation shall be:

Tripple S Waste Services Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8922 NW 181 Street
Miami Florida 33018

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hauling Debris & Demolition

ARTICLE IV SHARES

The number of shares of stock is:

One Hundred

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sean R. Gosine P/T
Sandra I Gosine VP/S

ARTICLE VI REGISTERED AGENT

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

Sean R. Gosine
8922 NW 181 Street
Miami, Florida 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

8922 NW 181 Street
Miami Florida 33018

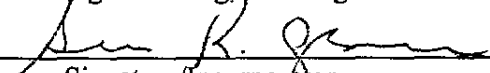
Sean R. Gosine

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

13 Nov 2005
Date



Signature/Incorporator

13 Nov 2005
Date