Poloco	051444
(Requestor's Name) (Address) (Address)	200069259272
(City/State/Zip/Phone #)	04/11/0601014017 **78.75
Office Use Only	RECEIVED 06 APR II AN II: 12 Wist of the stations ALL State FLORIDA
	CR 4-166

CB 4-11-06

## COVER LETTER

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

Contracted Services (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) SUBJECT:

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

S70.00 Filing Fee

S78.75 Filing Fee & Certificate of Status

-7

\$78.75 Filing Fee & Certified Copy

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

ADDITIONAL COPY REQUIRED

ROM:	TIM Fisher Name (Printed or typed)	
; —	5048 Tallow point	
	Tullahasser Fla 32309 City, State & Zip	
	City, State & Zip	
<u></u>	850-339-24997 Daytime Telephone number	ri :

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

## CLES OF INCORPORATION

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

ARTICLE I NAME The name of the corporation shall be: United Contracted Services and France

ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:

Tallow point Jullahusre Florida 22307 5048

## ARTICLE III PURPOSE

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The purpose for which the corporation is organized is:

Any and all Low full Burness

ARTICLE IV SHARES

The number of shares of stock is: 🖉 🖝

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Tim Fisher presolande Pourd Rosipsky Vic presedent

ARTICLE VI REGISTERED AGENT

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

TIMFisher 5048 Tallow point Tallahussae F/2

ARTICLE VII INCORPORATOR The name and address of the Incorporator is:

5048 Tellow part Tellahusser 1/4

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

PM 4: 24

Signature/Incorporator

Date