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COVER LETTER

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

SUBJECT: THE TRASH MASTERS INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
	(PRÓPOSED CORPO	RATE NAME – <u>MUST INCL</u> I	UDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the a	articles of incorporation and	l a check for:		
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:		Me (Printed or typed) EFFELSON ST. Address			
	MONTICELCO, CI	FLOREDA, 3	2344		

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

ARTÍCLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)			
The name of the companion shall be			
The name of the corporation shall be:			
THE TRASH MASTERS INC.			o =
ARTICLE II PRINCIPAL OFFICE			SEC VISIO
The principal place of business/mailing address is:	= ·-·	<u> </u>	ECHETAL SIOH OF
1075 N. JEFFERSON ST.			
MONTICELLO, FL. 32344			AN II: 35
ARTICLE III PURPOSE			. 3. A.
The purpose for which the corporation is organized is:			OI 💥
LAWFULL BUSNESS.			
ARTICLE IV SHARES			
The number of shares of stock is:		<i></i>	
100 SHARES			
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS		_	
List name(s), address(es) and specific title(s):	· · · · · · ·	Pos	<u>~</u>)
STEVE BOX (PRES) TAM KEN	RCITER	ب محد	
308 HERON LN. GII DECL	15 KD.	_	
List name(s), address(es) and specific title(s): STEVE BOX (RES) 308 HEROW LN. MONTICELLO, FL. 32344 MONTICELLO, FL. 32344 MONTICELLO	coff	, 32349	Ŷ
ARTICLE VI REGISTERED AGENT			
The name and Florida street address (P.O. Box NOT acceptable) of the	ne registered	agent is:	
TIM KERCHER			
1075 N. JEFFERSON ST.			
MONTECELLO, FL. 32344			
ARTICLE VII INCORPORATOR			
The <u>name and address</u> of the Incorporator is:			
STEUE BOX			
1075 N. JEFFERSON ST.			
MONTICELCO, FC, 32344 **********************************	·*****	*****	****
Having been named as registered agent to accept service of process for the above sto	ated corporatio	on at the place	
certificate. The familiar with and accept the appointment as registered agent and ag	ree to act in th	is capacity	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4	1/20/0	06
Signature/Registered Agent	-7	Date	<u>U</u>
1 By	۷,	1/2/2/0	<u>C</u>
Signature/Incorporator	-4	Date	<u> </u>
pyPrinter of tricorbovator			