

P06000069926

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

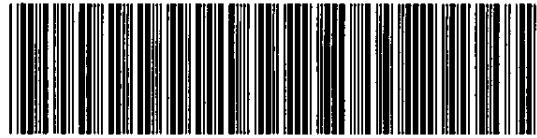
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/17/06--01014--007 **70.00

FILED

06 MAY 17 PM 12:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

po

COVER LETTER

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

SUBJECT: Tector Handyman 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: Kevin Tector

Name (Printed or typed)

32325 Oak Bluff Dr.

Address

Sorrento, Florida 32776

City, State & Zip

352-217-6188

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:

Tector Handyman Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

32325 Oak Bluff Dr.
Sorrento Fl. 32776

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
profit

ARTICLE IV SHARES

The number of shares of stock is:
1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Treasurer/President: Kevin Tector
32325 Oak Bluff Dr.
Sorrento Fl. 32776

ARTICLE VI REGISTERED AGENT

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

Kevin Tector
32325 Oak Bluff Dr.
Sorrento Fl. 32776

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kevin Tector
32325 Oak Bluff Dr.
Sorrento Fl. 32776

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

Signature/Incorporator

FILED
06 MAY 17 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/15/06
Date

5/15/06
Date