(Requestor's Name)				
(Address)	—			
(Address)	—			
_				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)	—			
<b>,</b>				
(Document Number)				
(,				
Certified Copies Certificates of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
	1			
	-			

Office Use Only



300076048193

06/12/06--01035--005 \*\*78.75

B.WHITE JUN 13 2006

# **COVER LETTER**

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

SUBJECT: Adva	nced Hydrotest Inc (PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM:	David J Za	ppala e (Printed or typed)	
	8470 West Kimberly	` , , , , , , , , , , , , , , , , , , ,	<u> </u>
	Homosassa, FL 344	48 y, State & Zip	
	603-557-7182 cell	Telephone number	<del></del>

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)

FILED

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

Advanced Hydrotest Inc

06 JUN 12 PM 1: 16

SECRETARY OF STATE TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8470 West Kimberly Ct Homosassa, FL 34448

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hydrostatic testing of pressure cylinders and any other activity allowed by law

#### ARTICLE IV SHARES

The number of shares of stock is:

10,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

David J Zappala President 8470 West Kimberly Ct Homosassa, FL 34448 Laraine G Zappala Secretary-Treasurer 8470 West Kimberly Ct Homosassa, FL 34448

## <u>ARTICLE VI REGISTERED AGENT</u>

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

David J Zappala 8470 West Kimberly Ct Homosassa, FL 34448

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

David J Zappala 8470 West Kimberly Ct Homosassa, FL 34448

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

 $\frac{6-6-2006}{0}$ Date 6-8-2006

Date