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COVER LETTER

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

SUBJECT: TAT	I'S ENTERPRISE IN	C		
	(PROPOSED CORPORA) ginal and one (1) copy of the artic	TE NAME – <u>MUST INCL</u>		
\$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 o Status PPY REQUIRED	
FROM:	TATI'S ENTERPRISE INC Name (Printed or typed) 6013 WEST IDLEWILD AVENUE Address Tampa Florida33634 City, State & Zip			
	(813)	326-8586		

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

Daytime Telephone number

ARTICLES OF INCORPORATION

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

FILED

ARTICLE I NAME

The name of the corporation shall be:

TATI'S ENTERPRISE INC

07 FEB -5 PM 7:55

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6013 WEST IDLEWILD AVENUE TAMPA FLORIDA 33634

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSTALLATION OF CABINET AND FLOOR WORK

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BARBARA J DIAZ 6013 WEST IDLEWILD AVENUE TAMPA FLORIDA 33634

ARTICLE VI REGISTERED AGENT

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

RAMON MARTINEZ 6407 AMUNDSON ST TAMPA FLORIDA 33634

ARTICLE VII INCORPORATOR

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

BARBARA J DIAZ -6013 WEST IDLEWILD AVENUE TAMPA FLORIDA 33634

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

Cignotive/Participal A cont

Signature/Incorporator

Date

Data