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| (Requestor's Name) | |
|---|-------------|
| (Address) | |
| (Address) | |
| (City/State/Zip/Phone #) | |
| ' PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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COVER LETTER

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

SUBJECT: T. C. JUTOMOT, VE Machine Shop 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 \$78.75 \$87.50\$

Filing Fee Filing Fee Filing Fee,
& Certificate of Status

Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Terrance Coleman

Name (Printed or typed)

5883 W.//.ams R./.

Address

Tallahassee F. 323//

City, State & Zip

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 tion shall be: Utomotive Machine Shop INC The name of the corporation shall be: PRINCIPAL OFFICE The principal place of business/mailing address is: (issimmee St The purpose for which the corporation is organized is: ny and all lawful business 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); Terrance Coleman President Bruce Clark VP REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Terrance Coleman, 5883 Williams Roach INCORPORATOR The <u>name and address</u> of the Incorporator is: vvance Coleman 8 Williams Roach 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