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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		



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TALLAHASSEE, FLORIT

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# **COVER LETTER**

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

<sub>SUBJECT:</sub> Tampa's Finest Firear	rms, Inc.	
(PROPOSED CO	ORPORATE NAME - MUST INCLUDE SUFFIX)  of the articles of incorporation and a check for:	
☐ \$70.00	Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED	
FROM: Douglas C. Ashley		
2801 N. Boulevard	Name (Printed or typed)  I Ave.  Address	
Tampa, FL 33602	City, State & Zip	
813-221-3684		
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:

Tampa's Finest Firearms, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2720 W. Waters Ave. Tampa, FL 33614-1837

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

### <u>ARTICLE IV SHARES</u>

The number of shares of stock is:

1,000 shares at \$.001 par value

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Douglas C. Ashley, President 2801 N. Boulevard Tampa, FL 33602

Carol Rowe, Vice President 5912 N. Packwood Ave. Tampa, FL 33604

#### ARTICLE VI REGISTERED AGENT

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

Douglas C. Ashley 2720 W. Waters Ave. Tampa, FL 33614-1837

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Douglas C. Ashley 2801 N. Boulevard Tampa, FL 33602

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

Date

Date

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