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SECRETARY OF STATE
TALLAHASSEF FLORID



COVER LETTER

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

SUBJECT: TAPEY INC.		
(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	l a check for:
\$\sqrt{9}\$70.00 \text{\$\sqrt{\$78.75}}\$ Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: KIERAN RICE		
Name	(Printed or typed)	
5802 TANAGERSIDE RO	AD Address	
LITHIA, FL 33547	State & Zip	
813-841-6656		
Doutine T	alanhana mumhar	

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:

TAPEY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5802 TANAGERSIDE ROAD, LITHIA, FL 33547

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SECRETARY OF STATE
TAIL WHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

100 (one hundred)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Kieran Rice, 5802 Tanagerside Road, Lithia, FI 33547: President, Secretary, Treasurer.

ARTICLE VI REGISTERED AGENT

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

Kieran Rice, 5802 Tanagerside Road, Lithia, Fl 33547

ARTICLE VII INCORPORATOR

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

Kieran Rice, 5802 Tanagerside Road, Lithia, Fl 33547

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