

PO8000090261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

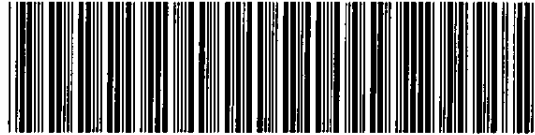
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000136460620

10/03/08--01025--006 \*\*78.75

FILED  
08 OCT -3 PM 2:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** COMPRESSED AIR TECHNICAL SERVICES, 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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Delmar S. Clark  
Name (Printed or typed)

20605 Great Laurel Avenue  
Address

Tampa, FL 33647  
City, State & Zip

813-523-2280  
Daytime Telephone number

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

FILED

08 OCT -3 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# 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:

Compressed Air Technical Services, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

20605 Great Laurel Avenue  
Tampa, FL 33647

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Compressed Air Management Sales/Consulting

## 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):

Delmar S. Clark - President  
20605 Great Laurel Avenue  
Tampa, FL 33647

Phyllis A. Clark - Vice President/Secretary  
20605 Great Laurel Avenue  
Tampa, FL 33647

## ARTICLE VI REGISTERED AGENT

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

Delmar S. Clark  
20605 Great Laurel Avenue  
Tampa, FL 33647

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Phyllis A. Clark  
20605 Great Laurel Avenue  
Tampa, FL 33647

\*\*\*\*\*

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

Delmar S. Clark

Signature/Registered Agent

Phyllis A. Clark

Signature/Incorporator

Phyllis A. Clark

9-30-2008

Date

9-30-2008

Date