

P08000105413

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

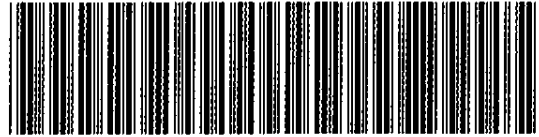
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 DEC -1 PM 4:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 12/3/08

COVER LETTER

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

SUBJECT: Tri-County Records 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: Nathan Mason
Name (Printed or typed)

10120 Boca Entrada Blvd. #208
Address

Boca Raton FL, 33428
City, State & Zip

(954) 479-6163
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: Tri-County Records Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 10120 Boca Entrada Blvd. #208
Boca Raton, FL 33428

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Perpetual

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): Nathan Mason (ceo)
10120 Boca Entrad Blvd. #208
Boca Raton, FL 33428

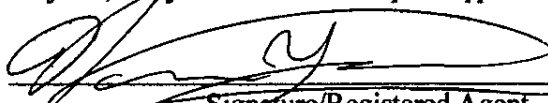
ARTICLE VI REGISTERED AGENT

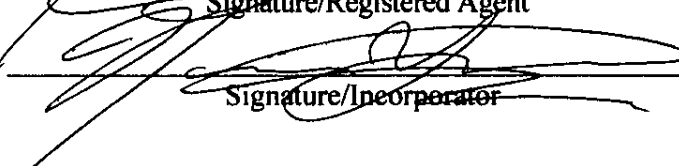
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Nathan Mason
10120 Boca Entrada Blvd. #208
Boca Raton, FL 33428

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Nathan Mason
10120 Boca Entrada Blvd. #208
Boca Raton, FL 33428

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

11/21/08
Date
11/21/08
Date

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08 DEC -1 PM 4:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA