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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Cartifical Coming				
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:	1st Tampa Bay Services Corp		
	(PROPOSED CORPORA	ITE NAME – <u>MUST INCI</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PY REQUIRED
FROM:		K Simpson (Printed or typed)	
	3602 Brigadoon Circle Address		
	Clearwater , FL 33759 City, State & Zip		
	727 50	4 0197	

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:

1st Tampa Bay Services Corp

ARTICLE II PRINCIPAL OFFICE

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

3602 Brigadoon Circle Clearwater, FL 33759

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Contract Services

ARTICLE IV SHARES

The number of shares of stock is:

2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Eleonora K Simpson CEO/COO/SEC 3602 Brigadoon Circle Clearwater FL 33759

ARTICLE VI REGISTERED AGENT

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

Eleonora K Simpson 3602 Brigadoon Circle Clearwater FL 33759

ARTICLE VII INCORPORATOR

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

3602 Brigadoon Circle Clearwater FL 33759

AZ.	01/08/2009			
Signature/Registered Agent	Date			
Ch.	01/08/2009			
Signature/Incorporator	Date			