

PO9000017695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

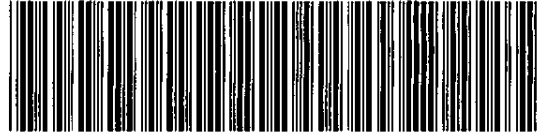
(Business Entity Name)

(Document Number)

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

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09 FEB 24 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. McKnight FEB 25 2009

## COVER LETTER

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

**SUBJECT:** SPLIT SECOND RENTS 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:** JEFFREY M PETERS

Name (Printed or typed)

9303 STANNUM ST, STE B

Address

TAMPA, FL 33619

City, State & Zip

813-661-0660

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:

SPLIT SECOND RENTS INC

## **ARTICLE II PRINCIPAL OFFICE**

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

9303 STANNUM ST, STE B  
TAMPA, FL 33619

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

EQUIPMENT RENTALS

## **ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

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

JEFFREY M. PETERS, PRESIDENT  
9303 STANNUM ST, STE B  
TAMPA, FL 33619

## **ARTICLE VI REGISTERED AGENT**

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

JEFFREY M PETERS  
9303 STANNUM ST, STE B  
TAMPA, FL 33619

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JEFFREY M PETERS  
9303 STANNUM ST, STE B  
TAMPA, FL 33619

\*\*\*\*\*

*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

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

FILED  
09 FEB 24 PM 2:15  
CLERK OF STATE  
TALLAHASSEE, FLORIDA