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09 JUL -7 PM 12:20
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TALLAHASSEE, FLORIDA

EP 7/7/09

COVER LETTER

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

SUBJECT: Tucker Services
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Steve Tucker
Name (Printed or typed)

135 Savannah R.D.
Address

Crawfordville FL 32327
City, State & Zip

850-421-5284
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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: *Steve*
Tucker Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

135 Savannah RD
Crawfordville FL, 32327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any and lawfull business

ARTICLE IV SHARES

The number of shares of stock is: *1*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Steve Tucker
135 Savannah RD 32327
CEO

ARTICLE VI REGISTERED AGENT

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

Steve Tucker
135 Savannah RD
Crawfordville FL, 32327

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Steve Tucker
135 Savannah RD
Crawfordville FL, 32327

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

Steve Tucker

Signature/Registered Agent

Steve Tucker

Signature/Incorporator

7/7/09

Date

7/7/09

Date

FILED
09 JUL - 7 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Peterson, Eula

From: Varnadore, RoseAnn
Sent: Monday, July 06, 2009 9:32 AM
To: Burch, Tim; Cunningham, Wanda; Dunlap, Ruby; Golden, Claretha; Ingram, Valerie; McKnight, Rebecca; Peterson, Eula; Poole, Loria; Shivers, Justin; White, Dale
Cc: Cushing, Diane; Dickey, Maryanne; Prather, Stacy; Varnadore, RoseAnn
Subject: Reply with your initials that you understand

Effective immediately July 6, 2009 ****please print out if you need to be reminded.

Notes must be approved by me. If I am not available but the document aside or get your Supervisor to take the filing until I am available.

The notes some of you are putting on the filings are incorrect.

When you email me you need to send the tracking number and w number as well as **WHAT YOUR NOTE SAYS.**

If you have questions please come ask.

RoseAnn Varnadore
Senior Section Administrator
ph. 850-245-6052
fx. 850-245-6804

Please take a few minutes to provide feedback on the quality of service you received from our staff. The Florida Department of State values your feedback as a customer. Kurt Browning, Florida's Secretary of State, is committed to continuously assessing and improving the level and quality of services provided to you. Simply click on the link to the "DOS Customer Satisfaction Survey." Thank you in advance for your participation. [DOS Customer Satisfaction Survey](#).