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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

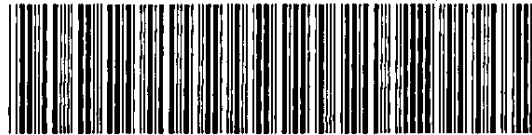
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

**SUBJECT:** TY'S AUTOMOTIVE REPAIR, INC.  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input checked="" type="checkbox"/> \$78.75
Filing Fee	Filing Fee
	& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

FROM: TYRONE A. CUNNINGHAM  
Name (Printed or typed)

1899 N. LECANTO HWY  
Address

LECANTO, FL. 34461  
City, State & Zip

352-527-2099  
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:

TY'S AUTOMOTIVE REPAIR, INC.

### **ARTICLE II PRINCIPAL OFFICE**

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

1899 N. LECANTO HWY  
LECANTO, FL. 34461

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

AUTOMOTIVE REPAIR

### **ARTICLE IV SHARES**

The number of shares of stock is:

1,000 SHARES

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

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

TYRONE A. CUNNINGHAM  
1899 N. LECANTO HWY  
LECANTO, FL. 34461

### **ARTICLE VI REGISTERED AGENT**

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

TYRONE A. CUNNINGHAM  
1899 N. LECANTO HWY  
LECANTO, FL. 34461

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

TYRONE A. CUNNINGHAM  
1899 N. LECANTO HWY  
LECANTO, FL. 34461

\*\*\*\*\*

*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*

X Tyrone A. Cunningham  
Signature/Registered Agent Incorporator

X 10-14-09  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 OCT 16 PM 12:45

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