

PO 9000091496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

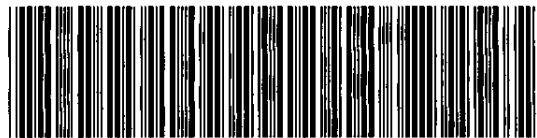
(Business Entity Name)

(Document Number)

Certified Copies: _____ Certificates of Status: _____

Special Instructions to Filing Officer:

Office Use Only



300162186353

11/05/09--01033--013 **70.00

SEARCHED
INDEXED
FILED
SERIALIZED
NOV 5 2009
11/6/09

FILED
NOV 5 2009
11/6/09

11/6/09
Rho

COVER LETTER

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

SUBJECT: Tropical Lift, 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: Ruth M. Martinez
Name (Printed or typed)

17901 NW 79th Ave

Address

Hialeah, Florida 33015

City, State & Zip

305-409-0948

Daytime Telephone number

rmartinez30@yahoo.com

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: Tropical Lift, Inc

ARTICLE II PRINCIPAL OFFICE

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

17901 NW 79th Ave Hialeah, Florida 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

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):

Title: President

Ruth M. Martinez 17901 NW 79th Ave Hialeah, Florida 33015

ARTICLE VI REGISTERED AGENT

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

Ruth M. Martinez

17901 NW 79th Ave

Hialeah, Florida 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ruth M. Martinez

17901 NW 79th Ave

Hialeah, Florida 33015

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

11-04-09

Date

Signature/Incorporator

11-04-09

Date

09 NOV -5 PM 5:18
FILED
FLORIDA
DEPARTMENT
OF STATE
REGISTRATION
AND
INSPECTION
DIVISION