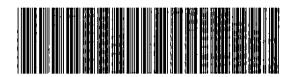
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|---|--|--|--|--|
| (Requestor's Name) | | | | |
| | | | | |
| (Address) | | | | |
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| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| | | | | |
| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| • | | | | |
| (Document Number) | | | | |
| | | | | |
| Certified Copies Certificates of Status | | | | |
| | | | | |
| Special Instructions to Filing Officer: | | | | |
| Special instructions to 1 imig Officer. | | | | |
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SECRETARY OF STATE

10 JUN -7 PH 2: 31





COVER LETTER

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

| SUBJECT: | D.Merced Truc | | | |
|--------------------------------------|--|---------------------------------------|---|--|
| | (PROPOSED CORPORAT | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) | |
| Enclosed are an orig | ginal and one (1) copy of the artic | cles 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 o Status | |
| | | ADDITIONAL CO | PY REQUIRED | |
| | | | | |
| FROM: | Danny ME | ERCED (Printed or typed) | | |
| 618 NW Indian Ridge fn. | | | | |
| Lake City F1 32055 City, State & Zip | | | | |
| | 904 – Daytime Te | 759 - 5626 elephone number | | |
| | E-mail address: (to be used | poricua by | ahoo.com | |

NOTE: Please provide the original and one copy of the articles.

| ARTICLES OF INCORPORA In compliance with Chapter 607 and/or | | Ąŕ in | PHOVEL AND FILED |
|---|--|---|---|
| • | - | | 1 Funda Sur |
| ARTICLE I NAME The name of the corporation shall be: | D. Merced TRI | icking anc 10 JUN | -7 PM 2:34 |
| The haine of the corporation shall be. | 2711101000 773 | SECRE TALLAH | iary of state Assee. Fl orida |
| ARTICLE II PRINCIPAL OFF | ICE | | |
| The principal street address and mailing | | 618 NW. India | in Ridge fn. 32055 |
| ARTICLE III PURPOSE The purpose for which the corporation Permits State | is organized is: enop ted under the Ed Of Florida. | ge in any or a way of the unit | bu s iness ed states and of |
| ARTICLE IV SHARES The number of shares of stock is: | | | |
| ARTICLE V INITIAL OFFICE | ERS AND/OR DIRECT | rors · | |
| List name(s), address(es) and specific | title(s): Danny l 618 NW Fr Lake Cety | Merciel - pres Idian Ridge Ln. Pl 32055 | ident |
| ARTICLE VI REGISTERED | | | |
| The name and Florida street address (| • | · . | t is: |
| | Danny Merc 618 NW India Lake City f | ed en Ridge for. el 20055 | |
| ARTICLE VII INCORPORATO | | (Jaco.) | |
| The name and address of the Incorpora | tor is: | ٥ | |
| | Danny Me | rced ion Ridge for | , |
| | LOKE CIAL F | rced ian Ridge fr 1 32055 | |
| | and and i | 330 <i>22</i> | |
| Having been named as registered age | nt to accept service of p | rocess for the above sta | ted corporation at the |
| place designated in this certificate, I | | - | - |
| agree to act in this capacity | , | (0) | 3/10 |
| \Signature/Registered A | gent | | Date |
| 1\ ml | ~ | | 3/10 |
| Signature/Incorporate | or | | Date |