

P10000052853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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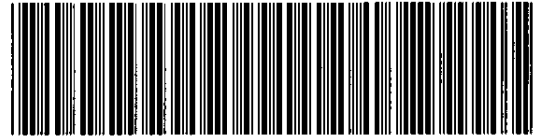
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/23/10--01028--015 **80.00

FILED
10 JUN 23 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6-24-10 CR

COVER LETTER

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

SUBJECT: T&S Safety Solutions, Corp

(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Tamece Knowles

Name (Printed or typed)

1803 NW 192nd street

Address

Miami, FL 33056

City, State & Zip

786-942-5833

Daytime Telephone number

ttknowles01@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:

T&S Safety Solutions Corp.

ARTICLE II PRINCIPAL OFFICE

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

1803 NW 192nd street
Miami, FL 33056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Occupational Health and Safety Consultation Services

ARTICLE IV SHARES

The number of shares of stock is:

\$ 1000 Share \$1.00 per value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Tamece Knowles	Sherone Mullings
1803 NW 192nd street Miami,	5466 NW 94 Ter
FL 33056	Sunrise, FL 33351
Co-Owner and Field Technician	Co-Owner and Business
	Administrator

ARTICLE VI REGISTERED AGENT

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

Sherone Mullings
5466 NW 94th Terrace
Sunrise, FL 33351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

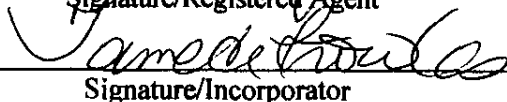
Tamece Knowles
1803 NW 192nd street
Miami, FL 33056

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

6/17/10

Date


Signature/Incorporator

6/17/10

Date

FILED
10 JUN 23 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA