

P10000066215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

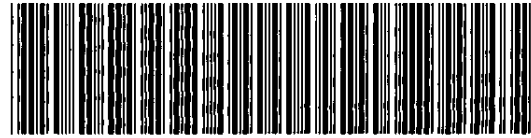
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/09/10--01032--005 **78.75

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2010 AUG -9 PM12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

21-81-8

COVER LETTER

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

SUBJECT: T & T FACILITY MAINTANCE 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: FRANKLIN DEESE

Name (Printed or typed)

725 LAKE GENEVA DRIVE

Address

ST AUGUSTINE FLORIDA 32092

City, State & Zip

904-230-8952

Daytime Telephone number

fdeese@att.net

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 & T FACILITY MAINTANCE INC.

ARTICLE II PRINCIPAL OFFICE

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

11052 FRISCO LANE

JACKSONVILLE FLORIDA 32257

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MOVING THIS BUSINESS TO A CORPORATION FROM SCH C

ARTICLE IV SHARES

The number of shares of stock is:

100 @ 1.00 PAR VALUE per sh.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BRAD RADO	11052 FRISCO LANE	President
APRIL RADO	Jacksonville Fl 32257	Vice President

ARTICLE VI REGISTERED AGENT

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

Brad Rado

11052 Frisco Lane

Jacksonville Fl 32257

ARTICLE VII INCORPORATOR

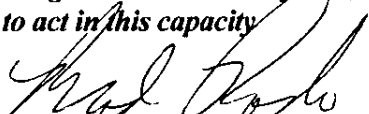
The name and address of the Incorporator is:

Deese Tax Accounting & Insurance Inc.

725 Lake Geneva Drive

St. Augustine Fl 32092

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



Signature/Incorporator

08/04/2010

Date

08/04/2010

Date

FILED
2010 AUG -9 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA