## P10000092110

(Re	equestor's Name)			
(Address)				
(Address)				
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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SECRETARY OF STATE
TALL A HASSEE

4MD 11/12

## **COVER LETTER**

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

SUBJECT: Promot Towing Ser	ruice Inc. TE NAME-MUST INCLUDE SUFFIX)
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75  Filing Fee & Certified Copy  & Certificate of Status
•	ADDITIONAL COPY REQUIRED
FROM: Joseph B S	(Printed or typed)
	mi Trail address
Punta Gorda	FL 33955 State & Zip
941 - 639 Daytime Te	9-4000 elephone number
PromptJoe E-mail address: (to be used	O Jahoo. Com  Tor 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)

The name of the corporation shall be: Prompt Tow	ing Service INC.	
Principal office  Principal street address  11139 Tam Am Tray  punta Gordu ft 33955	Mailing address,	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Any and all Lawrul Br	LSINESS	FILED 10 NOV -8 AM 11: 33 SECRETARY OF STATE ALLAHASSEE, FLORIT
ARTICLE IV SHARES The number of shares of stock is:		33 TATE ORIDA
Name and Title: Joseph Saladino pre Address: 11139 Thin 1 Am 1 Train Runta Gorda Ft. 339	Sidentame and Title:Address:	
Name and Title: Address:	A d daggar	
Name and Title:Address:	Address:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT accepts Name: Joorph Saladino Address: 11139 TAMIAMI Truil Aurita Gooda Ft 339	<u> </u>	
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  Address:  11139 Tamiami Tocopha Gorda fl. 3		
Having been named as registered agent to accept service of this certificate, I am familiar with and accept the appointment	process for the above stated corporation	at the place designated in is capacity
seph falacti		11-3-10 Date
Required Signature/Registered Age  I submit this document and affirm that the facts stated here document to the Department of South constitutes a third degree	in are true. I am aware that the false is	nformation submitted in a
Required Signature/Incorporator		11-3-10 Date