

PII 000075072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

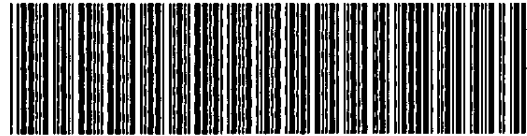
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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08/22/11--01019--020 \*\*78.75

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AND  
FILED  
11 AUG 22 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/4

**COVER LETTER**

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

**TRACO, INC.**

**SUBJECT:** \_\_\_\_\_  
(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:** \_\_\_\_\_  
**Thomas D. Jackson**  
P.O. Box 15156  
Panama City, Fl. 32406

850-769-7664  
Daytime Telephone number

EROCUPE 3 @ AOL.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)

APPROVED  
AND  
FILED

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**ARTICLE I NAME**

The name of the corporation shall be: **TRACO, INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2326, 23 CIRCLE  
PANAMA CITY, FL 32405

Mailing address, if different  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Thomas D. Jackson**  
P.O. Box 15156  
Panama City, FL 32406

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

"The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Florida."

**ARTICLE IV SHARES**

The number of shares of stock is: **1000 shares**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	_____	Name and Title:	_____
Address:	<b>Thomas D. Jackson, P.O. Box 15156</b> <b>Panama City, FL 32406</b>	Address:	_____
Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____

**ARTICLE VI REGISTERED AGENT**

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

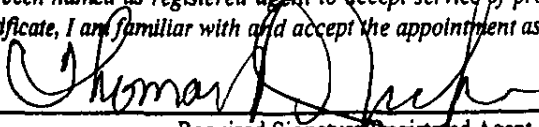
Name: **THOMAS D. JACKSON**  
Address: **2326, 23 CIRCLE**  
**PANAMA CITY, FL 32405**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **Thomas D. Jackson**  
Address: **P.O. Box 15156**  
**Panama City, FL 32406**

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

  
Required Signature Registered Agent

**8/18/11**  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
Required Signature Incorporator

**8/18/11**  
Date