

P11000105546

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H11000290852 3)))



H110002908523ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
 Fax Number : (850) 617-6381

From:

Account Name : FASTKIT CORP
 Account Number : I2010000009
 Phone : (305) 599-0839
 Fax Number : (305) 592-9591

RECEIVED DEC 12 2011

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
 RENTQUIP, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

11 DEC 12 PM 1:31
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

SEARCHED
 INDEXED

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

WITHDRAWN
AND
FILED

ARTICLE I NAME RENTQUIP, INC.

11 DEC 12 PM 1:31

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
514 SW 2ND AVE
OCALA, FL 34471

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mailing address, if different
514 SW 2ND AVE
OCALA, FL 34471

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RENT, SALE AND REPAIR OF EQUIPMENT

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEPHEN M. MORRISON

Name and Title:

Address: 514 SW 2ND AVE
OCALA, FL 34471

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: TERREL HOOD

Address: 514 SW 2ND AVE
OCALA, FL 34471

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: STEPHEN M. MORRISON

Address: 514 SW 2ND AVE
OCALA, FL 34471

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

Terrel Hood

12/12/2011

Date

Required Signature/Registered Agent

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.

S. M. Morrison

12/12/2011

Date

Required Signature/Incorporator