

P13000095806

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

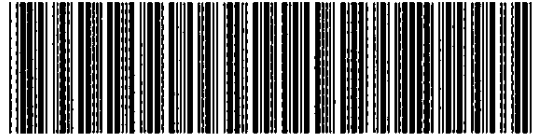
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W13000061954



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11/06/13--01027--016 \*\*78.75

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 NOV 25 PM 2:11

11/27/13

**COVER LETTER**

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

**SUBJECT:** Technical Assembly and Test Services, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** Sandy Gerhardt  
Name (Printed or typed)  
163 Browning Ave, NE  
Address  
Palm Bay, FL 32907  
City, State & Zip  
321-591-0820  
Daytime Telephone number  
gerhardtsandy@gmail.com  
E-mail address: (to be used for future annual report notification)

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DIVISION OF CORPORATIONS  
13 NOV 25 PM 2:11

**NOTE:** Please provide the original and one copy of the articles.



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13 NOV 25 AM 10: 59

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 7, 2013

SANDY GERHARDT  
163 BROWNING AVENUE NE  
PALM BAY, FL 32907

SUBJECT: TECHNICAL ASSEMBLY AND TEST SERVICES, INC.  
Ref. Number: W13000061954

We have received your document for TECHNICAL ASSEMBLY AND TEST SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 813A00025975

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

EFFECTIVE DATE 01/01/14

**ARTICLE I NAME**

The name of the corporation shall be: Technical Assembly and Test Services, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

163 Browning Ave, NE  
Palm Bay, FL 32907

Mailing address, if different is:

8746 NC Hwy 194 N  
Todd, NC 28684

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Assembly and test of digital and RF equipment

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: Sandra E. Gerhardt - President

Address: 8746 NC Hwy 194 N  
Todd, NC 28684

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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(conti.)

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: Sandra E. Gerhardt  
Address: 163 Browning Ave, NE  
Palm Bay, FL 32907

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Sandra E. Gerhardt  
Address: 163 Browning Ave, NE  
Palm Bay, FL 32907

*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*

Sandra E. Gerhardt  
Required Signature/Registered Agent

11-15-13

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.*

Sandra E. Gerhardt  
Required Signature/Incorporator

11-15-13

Date

Article VIII Effective Date of Start

The effective start date for business will be Jan 1, 2014.

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