## PK1000031764

(Re	equestor's Name)			
(Ac	ddress)	<u> </u>		
(Ac	idress)			
(Ci	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nam	e)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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## **COVER LETTER**

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

SUBJECT: The	- Tub Man	Inc.	
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filling Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Timothy So 664 Fox Cr.		y Jr.
	Tampa F	C 3 State & Zip	3635
		6-7072 Telephone number	
<del></del> -	E-mail address (to be use	pa @ AOL-C	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	lbe: The	tub Ma	n Inc.		
ARTICLE II PRINCIPAI Principa	COFFICE alstreet address		Mailing address, if different is:		
II664 Fox CI Tampa FL  ARTICLE III PURPOSE The purpose for which the corpo	33635	Morket	inq	14 APR -7 PM 2:51	
	FICERS AND/OR DIRI	<del></del>	le: CE	0	
Address III	othy 5. Tallag 64 Fox Crue apa FC 331	KOK Address:	11664 Tampa	Fox Crak P. Fl 33635	
Name and Title: 110 Address 116	nothy S. Jull 64 Fox Crae pa FC 330	Name and Title OK Address:	le: Direc 11664 1 Tampa	Fox Creek Da F1 33635	

Name and Title:	Name and Title:	
Address	Address:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT a	cceptable) of the registered agent is:	
Name Tally	reek Ox	14 APA
Jampa FC	73635	IL E
ARTICLE VII INCORPORATOR		S 2: 5
The <u>name and address</u> of the Incorporator is:	TII TO	
Name: Jimothy Scott  Address: 11664 Fox C  Jampa FC	reek or 33635	
Having been named as registered agent to accept service this certificate, I am familiar with and accept the appoin		
Required Signature/Registate		4-2-14 Date
submit this document and affirm that the flicts stated document to the Department of State constitutes a third		ormation submitted in a
document to the Department of State constitutes a third  The S. Required Signature/Incorporate Signature (Incorporate Signature)	_	4-2-14 Date
<b>)</b>		