

END 5/15

COVER LETTER

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

SUBJECT: Transcontinental Builders 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
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: albert b martell
Name (Printed or typed)

8083 stumie ave north
Address

st petersburg, florida, 33710
City, State & Zip

727-455-1930
Daytime Telephone number

amartell6@tampabay.rr.com
E-mail address: (to be used for future annual report notification)

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

MAY 6, 2015

TO: DEPARTMENT OF STATE, DIVISION OF CORPORATIONS

I AM ALBERT B. MARTELL, THE OWNER AND PRESIDENT OF TRANSCONTINENTAL BUILDERS INC. WHICH WAS ADMINSTRATIVELY DESOLVED. I DID NOT FILE THE ANNUAL REPORT. I WANT TO RELEASE THE BUSINESS NAME SO THAT I CAN USE THE SAME NAME AGAIN.

PLEASE NOTE I DID NOT RECEIVE A BILL OR EMAIL DUE TO THE CHANGE OF MY INTERNET CARRIER.

MY NEW EMAIL IS AMARTELL6@TAMPABAY.RR.COM

MY PHONE NUMBER IS 727-455-1930

THANK YOU,

Albert B Martell

15 MAY 11 AM 11:53
ST. PETERSBURG, FL 33705
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 05/06/2015 BY 60322

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Transcontinental Builders inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8083 stmic ave north

st petersburg florida 33710

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business, General Contractors, design & build , repairs and renovation of homes and business.

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: albert b. martell ,p.vp.t

Name and Title: _____

Address 8083 stmic ave north

Address: _____

st petersburg, florida

33710

Name and Title: _____ Name and Title: _____

Address _____ 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: albert b martell

Address: 8083 stimie ave north

st petersburg, florida 33710

15 MAY 14 AM 11:53
ALBERT B. MARTELL
8083 STIMIE AVE
ST PETERSBURG, FL 33710

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: albert b martell

Address: 8083 stimie ave north

st petersburg, florida 33710

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

ALBERT B. MARTELL
Albert B Martell

Required Signature/Registered Agent

5-7-2015

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.

Albert B Martell
ALBERT B MARTELL

Required Signature/Incorporator

5-7-2015

Date