

No. 1604 P. 1/3

# Orida repainer postate Aon or by Arms Electronic riling Cove Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : DAVID C. HASTINGS, CPA, PA

Account Number : I2000000168 Phone : (727)322-0909

Fax Number : (727) 322-0520

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

100: DAV 10 CPA @ TAMPOURRY, R.R. WON

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## FLORIDA PROFIT/NON PROFIT CORPORATION TIM DIESEL, PA

Certificate of Status	1
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S. GILBERT

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Corporate Filing Menu

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### H150001224573

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

RTICLE I NAM	E TIM DIESEL, PA		- 10 S
he name of the corpor	E TIM DIESEL, PA ation shall be:		
RTTCLE II PRIN	CIPAL OFFICE Principal street address	Mailing addre	ess, if different is:
656 85TH LANE		SAME	ess, ir diniegant is:
EMINOLE, PL 3377	· · · · · · · · · · · · · · · · · · ·		22 9
	POSE the corporation is organized is: LORIDA, INCLUDING A LICENSEL		
-			
he number of shares o	f stock is:	2	
ne number of shares o RTICLE V INITE Name and Tit	f slock is:	S Name and Title:	
he number of shares o	f stock is:  AL OFFICERS AND/OR DIRECTOR  TIM DIESEL, PST  16:  7656 85TH LAND	S Name and Title:Address:	
he number of shares o RTICLE V INITA Name and Tit Address	f stock is:  AL OFFICERS AND/OR DIRECTOR  Ic:  7656 85TH LANE  SEMINOLE, FL 33777	Name and Title:Address:	
ne number of shares o RTICLE V INITA Name and Tit Address	f stock is:  AL OFFICERS AND/OR DIRECTOR  Io:  7656 85TH LANE	Name and Title:  Address:  Name and Title:	
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Name and Tite Address  Name and Title Address	f stock is:  AL OFFICERS AND/OR DIRECTOR  Ic:  7656 85TH LANE  SEMINOLE, FL 33777	Name and Title:  Address:  Name and Title:  Address:	

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## #120001934273

Name a	nd Title:	Name and Title:
Addres	33	Address:
ARTICLE VI	REGISTERED AGENT	and the section of th
The name and :	Florida street address (P.O. Box NOT acce DAVID C HASTINGS CPA	plable) of the registered agent is:
Address:	2207 54TH ST S	
	GULFPORT, FL 33707	
<u>ARTICLE VII</u>	INCORPORATOR	
The <u>name and :</u>	address of the Incorporator is:	
Name:	DAVID C HASTINGS	
Address: 2207 54TH ST S	2207 54TH ST S	
	GULFPORT, FL 33707	·····
Effective date, i		. (OPTIONAL) ad cannot be more than five business days prior or 90 business
		oplicable statutory filing requirements, this date will not be listed as records.
		of process for the above stated corparation at the place designated in ent as registered agent and agree to act in this capacity
(	Mark Tolland	05/20/2015
	Required Signature/Registered A	gent Date
I submit this do document to the	ocument and affirm that the facts stated he Department of State constitutes a third deg	rein are true. I am aware that the false information submitted in a cree felony as provided for in s.817.155, F.S.
	OHOX	05/20/2015
Req	uired Signature/Incorporetor	Date