

P160000037030

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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02/22/16--01032--022 \*\*78.75

2016 APR 26 PM 3:46  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

APR 27 2016

F. BROWN

## COVER LETTER

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

**SUBJECT:** T & A 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:** ANDRES H CAMPOS

Name (Printed or typed)

2630 NE 17TH ST

Address

POMPAMO BEACH FL 33062

City, State & Zip

561-376-6088

Daytime Telephone number

foodguy2u@gmail.com

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 3, 2016

ANDRES H CAMPOS  
2630 NE 17TH STREET  
POMPANO BEACH, FL 33062

SUBJECT: T & A INC  
Ref. Number: W16000016099

We have received your document for T & A 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L16000103622 - T & A, LLC.

Please return 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.

Teresa Brown  
Regulatory Specialist II

Letter Number: 716A00004479

**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:

~~T & A INC~~

**TASE INC**

FILED  
2016 APR 26 PM 3:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2630 NE 17TH ST

POMPANO BEACH FL 33062

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **STARTED A NEW BUSINESS**

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: **ANDRES H CAMPOS**

Name and Title: **PRESIDENT**

Address: 2630 NE 17TH ST  
POMPANO BEACH FL 33062

Address:

Name and Title: **TAMMY L BATA**

Name and Title: **VP**

Address: 2630 NE 17TH ST  
POMPANO BEACH FL 33062

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: ANDRES H CAMPOS  
Address: 2630 NE 17TH ST  
POMPANO BEACH FL 33062

**ARTICLE VII INCORPORATOR**

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

Name: ANDRES H CAMPOS  
Address: 2630 NE 17TH ST  
POMPANO BEACH FL 33062

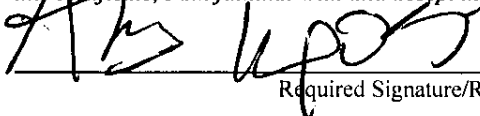
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 02/08/2016 (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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

2/8/16  
\_\_\_\_\_  
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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

2/8/16  
\_\_\_\_\_  
Date