PROCOCO 58865

(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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WILLAHASSEE, PLORIGA

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June 26, 2018

JOEL WALLICK 5847 MAGNOLIA ST N ST PETE, FL 33703

SUBJECT: THE BUCKET TRUCKCO LLC Ref. Number: W18000051997

We have received your document for THE BUCKET TRUCK CO LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document. We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

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.

Keyna E Page Regulatory Specialist II

Letter Number: 018A00011496

COVER LETTER

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

SUBJECT! he	OUCKET Truck (PROPOSED CORPORA	Co. LLC	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLI</u>	JDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l 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 o Status
		ADDITIONAL CO	PY REQUIRED
	Joel Wallick Name		
	5847 Magnolia	S+ N Address	
	st Pete, FL 3	33703 , State & Zip	
	727 Z 39 Daytime 1	6289 Telephone number	
	E-mail address: (to be use	ed for future annual report	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 be Bucket Truck	
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
EICO Park Blud N BZZ Pinellas Park FL 33781	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Sign in the services Company	stallation and backet
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	a o MGR
	ess: 8929 Baywood Park Dr Seminde FL 33777
Name and Title: Brandon Prodgen Name Address 10075 86th Way North Addr Seminde FL 33777	e and Title:
Name and Title: Joel Wallick MGR Name Address 5817 Magnolia St N Address St Petersburg, FL 33703	e and Title: Fess: Control Control

Name and Title:	Name and Title:	
Address	Address:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptab	sla) of the registered event in	
Name: Joel Wallick	te) of the registered agent is:	
Address: 5847 Magnetic St N		
Address: <u>5847 Magnelia St N</u> St Poterburg, FL 33	<u> 203</u>	,
ARTICLE VII INCORPORATOR		218 J
The <u>name and address</u> of the Incorporator is:		FII IAR IASS
Name: Joel Lallick		EILED L-5 PM VSSEEL PI
Address: SS47 Magnoliu St N St Peters burg, FL 33	<u>)</u> 3703	H 7: 02 STATE LURBA
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cafiling.)	(OPTIONAL) annot be more than five days prior or 90) days after the
Note: If the date inserted in this block does not meet the applic the document's effective date on the Department of State's reco		will not be listed as
Having been named as registered agent to accept service of prothis certificate, I am familiar with and accept the appointment a	ocess for the above stated corporation at the as registered agent and agree to act in this t	he place designated in capacity
Required Signature/Registered Agent	lick 517	24/18 Date
I submit this document and affirm that the facts stated herein document to the Department of State constitutes a third degree	are true. I am aware that the false infort felony as provided for in s.817.155, F.S.	mation submitted in a
Required Signature/Incorporator	Jallick 5	24 18 Date