

P20000034039

To: 17184082550 Fax: 18506176381

4/27/2020

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : USACORP INC.  
Account Number : I201300000019  
Phone : (718)362-4789  
Fax Number : (718)408-2550

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

Email Address: francis@tapatradie.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Tap A Tradie Inc.

Certificate of Status	0
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Page Count	02
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5/1/2020 12:32:10 PM PAGE 1/001 Fax Server



May 1, 2020

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

USACORP INC.

SUBJECT: TAP A TRADIE INC.  
REF: W20000043403

We have received your document for TAP A TRADIE INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please insert the title for the officers/directors given in article V.,

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.

KYLE D BRUMBLEY  
Regulatory Specialist II

FAX Aud. #: H20000122878  
Letter Number: 620A00009048

To: 17184082550 Fax: 18506176381

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# ARTICLES OF INCORPORATION

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

20

20 MAY -7 5M 10 33

## ARTICLE I NAME

The name of the corporation shall be: Tap A Trade Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2202 Key West CT #617

Kissimmee, Florida 34741

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Website Directory and Mobile App

## ARTICLE IV SHARES

The number of shares of stock is: 200

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Francis James Williams, President

Name and Title:

Address: 2202 Key West CT #617

Address:

Kissimmee, FL 34741

Name and Title: Joseph Paul McNally, Vice President

Name and Title:

Address: 37 Arylide Grove

Address:

Eglinton, Western Australia 6034

Name and Title:

Name and Title:

Address:

Address:

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P.L.

20 MAY -7 AM 10:34

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: Francis James Williams  
Address: 2202 Key West CT #617  
Kissimmee, FL 34741

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Francis James Williams  
Address: 2202 Key West CT #617  
Kissimmee, FL 34741

**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*

/s/ Francis James Williams

04/27/2020

Required Signature/Registered Agent

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.*

/s/ Francis James Williams

04/27/2020

Required Signature/Incorporator

Date