

P200000T3052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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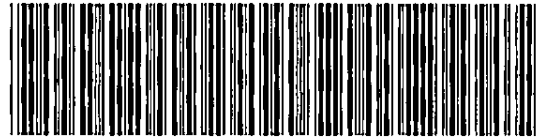
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

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SEP 13 2020

## COVER LETTER

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

**SUBJECT:** CHEM-TA, 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: Thomas Aikens  
Name (Printed or Typed)

3106 E. Lake Ave.  
Address

Tampa, Florida - 33610  
City, State & Zip

(813) 247-4187  
Daytime Telephone Number

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

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

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

SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE I NAME**

The name of the corporation shall be: CHEM - TA, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1312 N. 17<sup>th</sup> Street

3106 E. Lake Avenue

Tampa, FL 33605

Tampa, FL 33610

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To engage in any activity of business

permitted under the laws of the United States and of this State.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Nicole T. Aikens, President

Name and Title: \_\_\_\_\_

Address: 318 W. Frances

Address: \_\_\_\_\_

Tampa, FL 33602

Name and Title: Thomas Aikens, Secretary

Name and Title: \_\_\_\_\_

Address: 3106 E. Lake Ave.

Address: \_\_\_\_\_

Tampa, FL 33610

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: Thomas Aikens

Address: 3106 E. Lake Avenue

Tampa, FL 33610

**ARTICLE VII INCORPORATOR**

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

Name: Thomas Aikens

Address: 3106 E. Lake Avenue

Tampa, FL 33610

**ARTICLE VIII EFFECTIVE DATE**

Effective date, if other than the date of filing: August 21, 2020 (OPTIONAL)

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

[Signature]  
Required Signature/Registered Agent

8/20/20  
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.

[Signature]  
Required Signature/Incorporator

8/20/20  
Date

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TALLAHASSEE, FL

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