# TRANSMITTAL LETTER

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O.BOX 6327 TALLAHASSEE, FL. 32314

SUBJECT: HYDRAULIC OCTOPUS, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$ 70.00

\$ 78.75

\$ 122.50

\*\*\*\$ 131.25

FILING FEE

FILING FEE 4 CERTIFICATE

FILING FEE 4 CERTIFIED COPY

FILING FRE CERTIFIED COPY 4 CERTIFICATE

FROM:

**NEAL MCDANIEL** 

NAME ( PRINTED OR TYPED )

900001681809 -01/08/96--01088--007 \*\*\*\*131.25 \*\*\*\*131.25

7515 OTT WILLIAMS ROAD

ADDRESS

CLERMONT, FLA. 34711 CITY, STATE & ZIP

W.Ext. 6607

(904) 394 - 1905 / (809) 368-2188 H. Ext. 6857

DAYTIME TELEPHONE NUMBER

## ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

## ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

HYDRAULIC OCTOPUS, INC.

#### ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

7515 OTT WILLIAMS RD. CLERMONT, FLA. 34711

# ARTICLE III SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

ONE THOUSAND / (1000).

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

JAMES D. PEHRSON 1912 S. SHADY LANE LAKELAND, FLA. 33803

#### ARTICLE V INCORPORATOR (S)

THE NAME(S) AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

NEAL MCDANIEL PSC 1012 BOX 656 FPO AA 34058

Neal McDaniel 7515 OTT Williams Rd. Clermont, Fla. 34711

LEE Y. MCDANIEL 7515 OTT WILLIAMS RD. CLERMONT, FLA. 34711

SIGNATURE

oR

SAGNATURE

ARTICLES OF INCORPORATION FILING FEE - \$ 35.00

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE 9

PURSUANT TO THE PROVISIONS OF SECTION 607.C 01 OR 67.050 FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZATION UNDER THE LAWS OF THIS STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS:

#### HYDRAULIC OCTOPUS, INC.

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

JAMES D. PEHRSON ( NAME )

1912 S. SHADY LANE ( P.O. BOX NOT ACCEPTABLE )

LAKELAND, FL. 32803 (CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

( SIGNATURE )

DIVISION OF CORPORATIONS, P.O.BOX 6327, TALLAHASSEE, FL 32314