TRANSMITTAL LETTER



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

SUBJECT:	Total	Automation			CTAS	(0)					
	(Proposed corporate name - must include suffix)										
Enclosed is an	original and a	one(1) copy of the art	ticles of incorn		• • • •	25.4 2 1798 122.50	22E 010E **	52 ;7= **1			
Enclosed is all	Original and C	ma(1) copy of the art	deles of meorpe		HOOK TOT .		1				
\$70.00 Filing Fee		\$78.75 Filing Fee & Certificate	Filing I & Certi		■ \$131.25 Filing Fee, Certified Copy & Certificate						
	ADDITIONAL COPY REQUI										
FF	ROM: P	eter M.	Steinel	•	-						
		Nam	ne (Printed or type	ed)							
2439 Timbercrest Circle E							Nr 86				
	_ <u>C</u>	learwater, F	City, State & Zip	763		TARY OF	P	FILED			
		(813) 791-41	830 ne Telephone nur	nher		FLORIDA	PM 14 06	J			

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

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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Flo	ride
Business Corporation Act, hereby adopts the following Articles of Incorporation.	

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The name of the corporation shall be:

Total Automation Services Co.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2439 Timbercrest Clearwater, FL 33763

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Roter M. Steinel 2439. Timber crest

Cleanwater, FL 35763

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Peter M. Steinel 2439 Timbercrest Clearwater, PL 33763

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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/Registered Agent