P99000021317

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

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SUBJECT:	Thomas R. P.	AITSEL INC	- · · · · · · · · · · · · · · · · · · ·		
		rate name - must include si			
Enclosed is an origina	l and one(1) copy of the article	s of incorporation and a	check for :	Í	
□ \$70.00 Filing Fee	Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	PY REQUIRED	· · [
FROM:	Thomas B Name (P	PAITSEL rinted or typed)	99 M		
	1472 7al	LON Crest	Bluo.		
		OTIDA 327	12 PEFFLORIBE	Du	
_	(352) 3	326-4068	·		
Daytime Telephone number					

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

ARTICLES OF INCORPORATION

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

<u>ARTICLE I </u>	<u>NAME</u>	
The name of the	corporation	shall be:

Thomas E. PaiTsel, INC.

ARTICLE II PRINCIPAL OFFICE

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

1472 FALCON CREST Blub. ApopKA, FLOTIDA 32712

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Thomas E. PAITSEL 1472 FAICONCLOST BIND. Apop KA, FLOTIDA 32712

ARTICLE V INCORPORATOR

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

Thomas E. Paitsel 1472 Falconcust Blub.

Apopka, 760100 32713

Signature/Incorporator

2/1/9

Date

(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

Date

Note: The principal office and Are The Same. registeres office