

P99000082069

TRANSMITTAL LETTER

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

000002989380--7
-09/17/99--01001--016
*****87.50 *****87.50

SUBJECT: W Keith Gaines Authorized Distribution of Matco Tools
(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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

\$87.50

FROM:

Name (printed or typed)

Address

City, State & Zip

Daytime Telephone number

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

ajc
9/16

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:

W. Keith Gaines
Authorized Distributor of MATEO Tools, INC

ARTICLE II PRINCIPAL OFFICE

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

96 Honeysuckle Dr.
HAVANA FL. 32333

ARTICLE III SHARES

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

Five Hundred Shares \$1.00 Per Dollar Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

W. Keith Gaines
96 Honeysuckle Dr.
HAVANA FL. 32333

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

William Keith Gaines
96 Honey Suckle Dr.
HAVANA FL. 32333

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

16 day of Sept., 1999.

William Keith Gaines
Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE 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: W. Keith Gaines

Authorized Distributor of Mateo Tools, INC.

2. The name and address of the registered agent and office is:

William Keith Gaines
(Name)

96 Honey Suckle Dr
(P.O. Box not acceptable)

HAVANA FL. 32333
(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.

William Keith Gaines
(Signature)

9/16/97