## TRANSMITTAL LETTER

## Department of Stat

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

900003035119---11/04/99--01062--008

(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

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

**Certified Copy** 

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: George Triarkos	
Name (Printed or typed)	
2732 Sw 55 Street	99 NOV SECKET
Address	三
Ellall Consers	SSI + T
Fort Lowlandale FL 335(2 City, State & Zip	
ony, but to hip	Service Servic
(954) 894-4024	3: 52 TATE ORIDA
Daytime Telephone number	<del></del>

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

NOV 0 5 1999 K. Rolfe

## 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.
ARTICLE I NAME  The name of the corporation shall be:  Tubed Enterprises Incorporated  ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:
Tubed Enterprises Incorporated
ARTICLE II PRINCIPAL OFFICE
Si
2732 SW 55 street
Fort Lauderdale, Florida 333312
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
25
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:
George Trachos 2732 SW 55 stret
Fortlandedale, Fl 33312
ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
George Triarkos
2732 SW 55 Street. Fort Lauderflale, FL 333 12
Henry June 11/2/99
Signature/Incorporator 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.
V/ 1000 / 11/2/99
Signature/Registered Agent Date
<i>y y</i>