

711000071961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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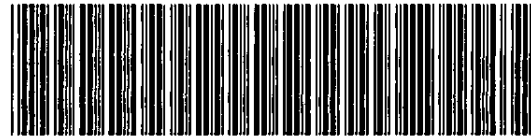
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers AUG 11 2011

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2 TO ME
COVER LETTER
1 FOR FILE

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

SUBJECT: 3Ts Eng. Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: B. TAXI THOM THOMPSON
Name (Printed or typed)

Bx 4774
Address

FT WALTON BCH FL 32549
City, State & Zip

(850) 225-3408
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

SECRETARY OF STATE
TALLAHASSEE, FL 32304

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

3TS Inc, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

26 NW BEACH PKWY SUITE E-18
FT WILTON BEACH
FL 32549

Mailing address, if different is:

PO Box 4774
FT WILTON BEACH
FL 32549

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A UMBRELLA SERVING
TO COVER MANY DIVERSE INCOME GENERATING
ENTREPRENEURS

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: B. TAXI THOM THOMPSON
Address: PO Box 4774
FT WILTON BEACH
FL 32549

Name and Title: PSON, PRES
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

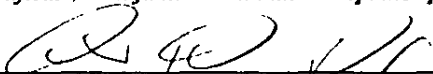
Name: B. TAXI THOM THOMPSON
Address: 26 NW BEACH PKWY SUITE E-18
FT WILTON BEACH FL 32549

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: B. TAXI THOM THOMPSON
Address: PO Box 4774
FT WILTON BEACH FL 32549

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

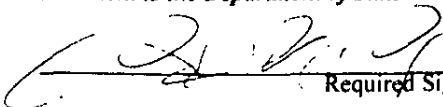


Required Signature/Registered Agent

11/5/11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

11/5/11

Date

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CORPORATION DIVISION