

F07000005680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

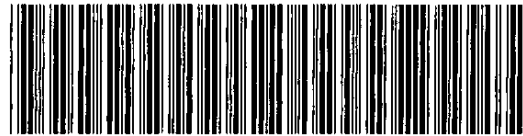
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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11/08/07--01021--002 **70.00

FILED

2007 NOV 16 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-19



TOM SAWYER COMPANY

RECEIVED

07 NOV 16 AM 8:00

DIVISION OF CORPORATIONS

Tuesday, November 13, 2007

Ms. Loria Poole
Florida Department of State
Divisions of Corporations
Regulatory Specialist II
PO Box 6327
Tallahassee, FL 32314
850.245.6934
www.smallbiz.org

Letter Number: 707A00065133

Dear Ms. Poole,
Thank you for your letter dated 11/08/07. As instructed, we have removed all reference to our D/B/A name of THE TOM SAWYER COMPANY. Our official name of TOM SAWYER PRODUCTION< INC is listed properly.

We have noted that you are in receipt of our \$70.00 filing fee and we appreciate all your efforts in the filing of our request. We are returning our form, as well as our SC State Certificate of Existences. Please feel free to contact us should you need any additional information.

Sincerely,

Carolyn Sawyer
President/CEO
Email: carolyn@TomSawyerCompany.com
Tom Sawyer Company
SC Office – 1218 Maple St, Columbia, SC 29205
Capital Station, PNB 12551, Columbia, SC 29211
SC Office ~ 803.252.8773
Cell ~ 803.414.0222



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 8, 2007

CAROLYN SAWYER
TOM SAWYER PRODUCTIONS, INC. (DBA TOM S
1218 MAPLE STREET
COLUMBIA, SC 29205

SUBJECT: TOM SAWYER PRODUCTION, INCORPORATED DBA TOM
SAWYER COMPANY
Ref. Number: W07000055281

We have received your document for TOM SAWYER PRODUCTION, INCORPORATED DBA TOM SAWYER COMPANY and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Regulatory Specialist II

Letter Number: 707A00065133

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Tom Sawyer Productions, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Carolyn Sawyer
(Name of Person)

Tom Sawyer Productions, Inc. (dba Tom Sawyer Company)
(Firm/Company)

1218 Maple Street
(Address)

Columbia, South Carolina 29205
(City/State and Zip code)

For further information concerning this matter, please call:

Carolyn Sawyer at (803) 414-0222
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Tom Sawyer Productions, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

TSC

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. South Carolina 3. 5 71040-570
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 19, 1998 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1218 Maple Street
(Principal office address)
PMB 12551 Columbia, SC 29211
(Current mailing address)

8. Business (Sector: Communications)
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Herman Ross, NCI

Office Address: 160 Green Haven Circle

Oldsmar, Florida 34677
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
2007 NOV 16 AM 9:30
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Carolyn Sawyer

Address: 4711 Oakwood Drive
Forest Acres, South Carolina

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Carolyn Sawyer

Address: 4711 Oakwood Drive
Forest Acres, South Carolina

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

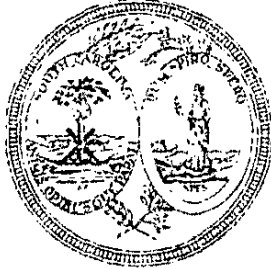
13. 

(Signature of Director or Officer listed in number 12 of the application)

14. President/CEO

(Typed or printed name and capacity of person signing application)

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

TOM SAWYER PRODUCTIONS, INC.,
a corporation duly organized under the laws of the State of South Carolina on June 19th, 1998, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
7th day of November, 2007.

A handwritten signature in cursive script that reads "Mark Hammond".
Mark Hammond, Secretary of State