

N12000009048

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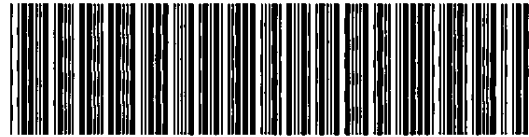
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SECRETARY OF STATE
TALLAHASSEE, FL 32399

W12-
46319

9-26-12
D

COVER LETTER

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

SUBJECT: TORNADO DISARMING SYSTEMS DEVELOPMENT AND
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
TESTING, INC

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 of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: DR RILEY H. NELSON
Name (Printed or typed)

5504 ALHAMBRA DRIVE
Address

ORLANDO, FL 32808
City, State & Zip

407-293-0027
Daytime Telephone number

rnelson83@cfl.rr.com
E-mail address: (to be used for future annual report notification)
(RNELSON83@CFL.RR.COM)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 7, 2012

RILEY H. NELSON
5504 ALHAMBRA DR
ORLANDO, FL 32808

SUBJECT: TORNADO DISARMING SYSTEMS DEVELOPMENT AND
TESTING, INC.
Ref. Number: W12000046319

We have received your document for TORNADO DISARMING SYSTEMS DEVELOPMENT AND TESTING, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article(s) I.

Please return the corrected original and one copy of your document, along with 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) 245-6052.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 012A00022649

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: TORNADO DISARMING SYSTEMS DEVELOPMENT AND TESTING, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
5504 ALHAMBRA DRIVE
ORLANDO, FL. 32808

Mailing address, if different is:
P.O. BOX 618327
ORLANDO, FL. 32861

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO DEVELOP AND TEST SYSTEMS DESIGNED TO DISARM TORNADOES, REDUCING THEIR IMPACT ON COMMUNITIES

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: BY MAJORITY VOTE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARK A. R. NELSON, PRES.
Address: 1500 BIRCH RIDGE WAY
STONE MOUNTAIN, GA 30083

Name and Title: _____
Address: _____

Name and Title: PAUL E. NELSON, V. PRES.
Address: 23843 STANHURST AVE
TERRANCE, CA 90501

Name and Title: _____
Address: _____

Name and Title: SYLVIA SEARIES-ELAM, SEC. & TREAS.
Address: 511 TERRA PLANTATION LN
NE BARY, FL 32713

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: DR. RILEY H. NELSON
Address: 5504 ALHAMBRA DRIVE
ORLANDO, FL. 32808

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DR. RILEY H. NELSON
Address: 5504 ALHAMBRA DRIVE
ORLANDO, FL 32808

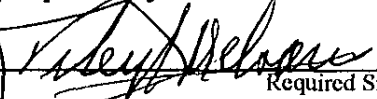
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature of Registered Agent

09/04/12
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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 of Incorporator

09/04/12
Date

FILED
12 SEP 20 PM 4:05
SECRETARIAT OF STATE
TALLAHASSEE, FL