P 0 0 0 0 0 0 0 / 5 1 6 3

Department of State Division of Corporation P. O. Box 6327 Tallahassee, FL 3231 SUBJECT:	4 3TD TNC	ate name - must înclude suffi	6000031:	M 8: 12	HLED -83.50	
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for :			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
FROM:		Eow //				
		o MATO RD				
ST. AUGUSTWE, FL 32086 City, State & Zip						
904-797-5232					÷ -	
Mr Brown ORIZATION BY PHOR	GAVE TO TOTE: Please provide the or	iginal and one copy of	the articles.			

CORRECT R.A.

300. EXAM __ 70

DATE 2-14-60

1000 8 3 ham

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida	ī
Business Corporation Act, hereby adopts the following Articles of Incorporation.	

ARTICLE	I	NAME
---------	---	------

The name of the corporation shall be:

3TD, INC.

ARTICLE II PRINCIPAL OFFICE

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

103 TOLOMATO RD ST - AUGUSTWE, FL 32086

ARTICLE III **SHARES**

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

TL BROWN

INCORPORATOR

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

TL BROWN

TOLOMITO RO

ST. AUGUSTWE, FL 32086

Signature/Incorporator / Reg. agent

(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