

P000000 38763

TRANSMITTAL LETTER

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

7000003175847-0
-03/20/00-01095-002
*****87.50 *****87.50

SUBJECT: TROPICAL HORIZONS INC.
(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 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: TERRY WILKINS & JENNIFER NEELY
Name (Printed or typed)

1643 Brookwood Cir
Address

Gulf Breeze, FL 32561
City, State & Zip

(850) 916-1235
Daytime Telephone number

FILED
00 APR 18 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Terry
GAVE
AUTHORIZATION BY PHONE TO
DIRECTOR at 4
DATE 4/18
DOC. EXAM BC

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

B. REGISTER APR 18 2000

W-8017



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 27, 2000

TERRY WILKINS
1643 BROOKWOOD CIRCLE
GULF BREEZE, FL 32561

SUBJECT: TROPICAL HORIZONS INC.
Ref. Number: W00000008017

We have received your document for TROPICAL HORIZONS 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please list the incorporators name in article 7, a corporation can't be it's own incorporator.

Please return the 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) 487-6925.

Angela Revell
Document Specialist

Letter Number: 500A00016602

FILED

00 APR 18 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
FLORIDA BUSINESS CORPORATION ACT

Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporator adopts these articles of Incorporation for the purpose of forming a for-profit corporation.

Article 1. The name of the Corporation is: *TROPICAL HORIZONS ACCENT Lighting INC.*

Article 2. The principal place of business and mailing address of this corporation is:

*1643 BROOKWOOD CIRCLE
GULF BREEZE, FL. 32561*

Article 3. The corporation is authorized to issue one class of stock, that being shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation. *5000*

Article 4. No Director shall be held liable to the corporation or its shareholders for monetary damages due to a breach of fiduciary duty, unless the breach is a result of self-dealing, intentional misconduct, or illegal actions.

Article 5. The effective date of this filing is ☒ The actual date and time of filing.

☐ 1 / 1 at 12 o'clock PM.

Article 6. The name and address of the corporation's initial registered agent is:

*Terry Wilkins, 1643 Brook Wood Circle
Gulf Breeze, FL 32561*

Having been named as registered agent and to accept service of process for the above named corporation at the place designated in this document, 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.

Signature of Registered Agent:

Terry Wilkins
*1643 BROOKWOOD CIRCLE
GULF BREEZE FL 32561*

Date: *4/12/2000*

Article 7. The name and street address of the incorporator of this corporation is:

*TERRY WILKINS 1643 BROOKWOOD CIRCLE, GULF BREEZE, FL 32561
JENNIFER NEEDY 1643 BROOKWOOD CIRCLE, GULF BREEZE, FL 32561*

In witness whereof, the undersigned incorporator has executed these Articles of Incorporation on the date below.

Signature of Incorporator:

Terry Wilkins
J. Needy

Date:

*4/12/2000
4/12/2000*