

P00000068653

TRANSMITTAL LETTER

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

SUBJECT: TBS & Associates Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

400003327674--8
-07/19/00--01023--010
*****87.50 *****87.50

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: TBS & Associates Inc
Name (Printed or typed)

5454 WW Hally Rd.
Address

Tallahassee, Florida 32311
City, State & Zip

(850) 656-2169
Daytime Telephone number

00 JUL 19 AM 10:16 RECEIVED
FILED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATION

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

1 L. Burgh 100 10 9999

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:

TBS & Associates Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5454 WW Kelly Rd.,
Tallahassee, FL 32311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Electrical Inspection Services
Expert Witnessing
Codes & Standards - Product Safety

ARTICLE IV SHARES

The number of shares of stock is:

(2)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Ms Susan A. Schoen President (CEO)
Mr Robert A. Schoen V. President
5454 WW Kelly Rd.,
Tallahassee, FL 32311

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Robert A. Schoen
5454 WW Kelly Rd.,
Tallahassee, FL 32311

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert A. Schoen
5454 WW Kelly Rd.,
Tallahassee, FL 32311

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

Robert A. Schoen
Signature/Registered Agent

7/19/00
Date

Robert A. Schoen
Signature/Incorporator

7/19/00
Date

FILED
00 JUL 19 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA