Olympia St.

Division of Corporations

Page 1 of 2



Florida Department of State

Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000025314 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : ACCOUNTING & BEYOND

Account Number : I19990000223 Phone : (813)998-9800 Fax Number : (813)998-9801

FLORIDA PROFIT CORPORATION OR P.A.

TBH MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

1	A		145 m / 461
1 44711	TOTAL A	\sim	753 <i>1</i> 45
17121	$\mathbf{v} \mathbf{v} \mathbf{v}$		<u> </u>
		7-	

Date

ARTICLES OF INCORPORATION

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

Corporation act increas adopts incoor	10,7,1,6,11,110,101,0,0	••••		
ARTICLE I NAME		Δ.	9/2	
The name of the corporation shall be:		<u> </u>		
La Company of the Com	TBH MANAGEMENT, INC.		٠ ا	
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing	g address of this corporation s	shall be:		
[8745 Gunn Hwy.			
<u> </u>	Odessa, FL 33556		1 9	
ARTICLE III SHARES The number of shares of stock that this continuous and (1,000).	orporation is authorized to have	e outstanding at any one time	is One	
ARTICLE IV INITIAL REGISTERED AG The name and Florida street address of the				
. 1	Thomas Brian Harmon		\neg	
	19617 Gunn Hwy.			
	Odessa, FL 33556			
ARTICLE V INCORPORATOR The name and address of the incorporate	or to these Articles of Incorpora	ration are:		
	Thomas Brian Harmon			
19617 Gunn Hwy.				
	Odessa, FL 33556			
Thomas Britary	nn	03/07/01		
Signature/Incorpo	vrator	Date		
-				
(An additional arti	cle must be added if an effect	tive date is requested.)		
Having been named as registered agent place designated in this certificate, I here capacity. I further agree to comply with to performance of my duties, and I am fam	illar with sun sceedi tile onlige	cess for the above stated corports registered agent and agree to elating to the proper and compations of my position as register	oration at the to act in this lete ered agent.	
Thomas Bria	Harmon	03/07/01		

Signature/Registered Agent