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TRANSMITTAL LETTER

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUL -9 PM 4:02

APPROVED
AND
FILED

SUBJECT: THarrison, 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: Ted Harrison
Name (Printed or typed)

514 Vinnedge Ride
Address

Tallahassee FL 32303
City, State & Zip

850-681-1941
Daytime Telephone number

900004465399--7
-07/10/01--01002--005
*****70.00 *****70.00

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

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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:

T Harrison, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

401 Saint Francis Street
Tallahassee, FL 32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful business allowed
to be conducted in the state of FL

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

Ted Harrison
514 Vinnedge Ride
Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ted Harrison
514 Vinnedge Ride
Tallahassee, FL 32303

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

Ted Harrison
Signature/Registered Agent

7-9-01
Date

Ted Harrison
Signature/Incorporator

7-9-01
Date

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AND
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