# POIOOI/832/ OI DEC 13 PH 9: 57

DATE: December 10, 2001

Secretary of State Division of Corporations P. O. Box 6327 Tallahassee, Fl. 32314

Re: TIN CORPORATION (name of corporation)

000004724340--7 -12/13/01--01035--009 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with a check in the amount of \$78.75.

This represents the cost of Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

Dustin Le (individual's name)\_\_\_

TIN CORPORATION

THOMAS L. MESSER, E.A., PA ENROLLED AGENT 1323 LYONS ROAD COCONUT CREEK, FL 33063

MAILING ADDRESS OF CORPORAT	TION	954-979-3620
627 BANKS ROAD MARGATE, FL 33063		
(305) 935-5556 AREA CODE NUMBER	EXT	-

AUTHORIZATION BY PHONE TO
CORRECT Name to be TINLE corporation
WATE 12/14 @ 9:40 am
LOC. EXAM

DOC. EXAM

DOC.

W01-28617 J. BRYAN DEC 1 4 2001

### ARTICLES OF INCORPORATION

OF\_

TIN LE CORPORATION

(name of Corporation

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

corpore	anon under the t	aws or the St	ate of Florid	aa.						,	101111
				ARTICLE	- CORPOR	RATE NAM	E				
The na	me of the corpo	ration is:		TIN LE C	ORPORATIO	N			9	7	
				ARTICLE I	i – DURATI	ON	<u>.                                      </u>	(2)		(A) (C)	
This co	rporation shall e	xist perpetua	lly unless d	issolved acc	ording to Fl	orida law.				2	
				ARTICLE !	II PURPO	SE			105	بي اک	
The cor States a	rporation is orga and the State of	anized for the Florida.	purpose o	of engaging	in any activ	rities or bus	siness perm	nitted und	er the law	vs of the	United
				ARTICLE I	√ – CAPITA	L STOCK					
The cor Dollar(s	poration is autho (\$1.00	orized to issue	e100 ar value Co	_share (100 ommon Stoc	) of QNE_ k, which sha	II be desigr	nated "Comi	mon Share	ə."		7
		ART	ICLE V - IN	VITIAL REGI	STERED O	FFICE AND	AGENT				
	cipal office, if kr										-
Name:	TIN LE CORPO	RATION	- 1 <u>1 118</u>			<u> </u>	<u> </u>				<u> </u>
Address	: 627 BANKS I	ROAD					-				
City: MA	RGATE	Florida	· · · · · · · · · · · · · · · · · · ·	Zip: 33063	<u>.</u>		<u> </u>				
The nam	e and street ad				of this Corpo	ration is:					
Name : 1	homas Messer 1323 Lyons Ri	Emoned Ade	ent, Accoun	itant, P.A.	<del></del>				· <u>-</u> -	₹	· = ·
City: Cod	conut Creek	pad Florida	Zip	33063	-		<u> </u>		-	<u></u>	TT TE:
		ARTI	CLES VI –	INITIAL BOA	RD OF DIF						<u>, 1970.</u>
This corp to time by are as fol	oration shall ha y the By-Laws, I llows:	ve ONE ( 1	\ directors	initially The		ı. <i>.</i>	y be either ses of the i	increased nitial direc	or dimini ctor(s) of	shed from the corpor	time atio
Name: Address	DUSTIN LE 627 BANKS R				-		_				
City	MARGATE	Florida	Zip 330	63	-						
Name:									-		
Address City	Florida	Zip					-				

Form 215: ARTICLES OF INCORPORATION, PAGE 1

## ARTICLE VII - INCORPORATORS

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NAME: DUSTIN LE  ADDRESS: 627 BANKS ROAD  CITY: MARGATE STATE: FLORIDA ZIP: 33063  IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this (Seal)  STATE OF FLORIDA (Seal)  STATE OF FLORIDA (Seal)  COUNTY OF BROWARD  Defore me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared DUSTIN LE  DUSTIN LE  Anown to me and known to be the person(s) who executed the foregoing articles of Incorporation, and who acknowledged before me that HE executed these Articles of Incorporation.  N WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this Maray Public, State of Florida at Large)	The names and addresses	of the incorporators signing	g these Articles of Incorporati	ion are as follows:
IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this  (Seal)  STATE OF FLORIDA COUNTY OF BROWARD  Defore me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared  DUSTIN LE  DUSTIN LE  SHOWN TO BE ARTICLES OF Incorporation, and who acknowledged before me that HE executed these Articles of Incorporation.  WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this day of Duc., 2001.	NAME: DUSTIN LE			1011 010 03 10110 WS.
IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this  (Seal)	ADDRESS: 627 BANKS RO	OAD		
(Seal)  STATE OF FLORIDA COUNTY OF BROWARD  Defore me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared  DUSTIN LE  DUSTIN	CITY: MARGATE	STATE: FLORIDA	ZIP: 33063	
STATE OF FLORIDA COUNTY OF BROWARD Defore me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared DUSTIN LE  Shown to me and known to be the person(s) who executed the foregoing articles of Incorporation, and who acknowledged before me that HE executed these Articles of Incorporation.  N WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this day of Dec., 2001.  Makes	IN WITNESS WHEREOF, th	ne undersigned subscriber( ,20 <u>/</u> .	s) have executed these Artic	les of Incorporation this
STATE OF FLORIDA COUNTY OF BROWARD  Defore me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared  DUSTIN LE  DUSTIN LE  Chown to me and known to be the person(s) who executed the foregoing articles of Incorporation, and who acknowledged before me that HE executed these Articles of Incorporation.  NWITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this  day of Duc., 200/.  Makan			May 1	
DUSTIN LE	STATE OF FLORIDA COUNTY OF <u>BROWARD</u>			(Seal)
N WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this	pefore me, a Notary Public a personally appearedDUSTIN	uthorized to take acknowle	dgements in the State and C	county set forth above,
	N WITNESS WHEREOF. I h	ave hereunto affixed my ha	and and seal, in the State and  Mease	



# CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

TIN LE CORPORATION,

(name of corporation)

Pursuant to Florida Statues Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the state of Florida with Is registered office as indicated in the Articles of Incorporation

at 1323 LYONS ROAD COCONUT CREEK, FLORIDA 33063

Has named: THOMAS MESSER, Enrolled Agent, Accountant, P.A.

Located at the aforesaid address, as its Registered Agent to accept service of process within this state.

### ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above Stated corporation at the place designated in this certificate, and being familiar with The obligations of that position, I hereby accept to act in this capacity, and agree to Comply with the provisions of Florida Law in keeping open said office.

(registered agent)

FORM 215: CERTIFICATE & ACKNOWLEDGEMENT REGISTERED AGENT