

TRANSMITTAL LETTER

PO2000108499

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

100008243171--8  
-10/07/02--01070--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: T. Davis Communications, 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: Twyman Davis  
Name (Printed or typed)

4743 N Australian Ave Ste. 206  
Address

West Palm Beach FL 33407  
City, State & Zip

561-841-7227  
Daytime Telephone number

FILED  
02 OCT -7 PM 3:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

g/10/8

# 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. Davis Communications, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4743 N. Australian Ave  
Suite 206  
West Palm Beach, FL 33407

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Wireless Communication Sales

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Twyman Davis  
4743 N. Australian Ave.  
Suite 206  
West Palm Beach, FL 33407

## ARTICLE VI REGISTERED AGENT

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

Twyman Davis  
4743 N. Australian Ave.  
Suite 206  
West Palm Beach, FL 33407

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Twyman Davis  
4743 N. Australian Ave.  
Suite 206  
West Palm Beach, FL 33407

\*\*\*\*\*  
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

\_\_\_\_\_  
Signature/Registered Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

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