P0300001409/

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
(City/State/Zip/Phone #) PICK-UP	(Requestor's Name)
(City/State/Zip/Phone #) PICK-UP	(Address)
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SECRETARY OF STATE

RECEIVED

OBJANSI AND: 54

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

tcb In	corporated	
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Knnual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
Oignature .		Vehicle Search
	<u> </u>	Driving Record
Requested by:	(1) 1/21	UCC 1 or 3 File
Name	Date Time	UCC 11 Search
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Walls In	Will Diek He	G. day



FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

January 31, 2003

CAPITAL CONNECTION INC

SUBJECT: TCB INCORPORATED Ref. Number: W03000002968

We have received your document for TCB INCORPORATED. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is F99000005918.

Please return the original and one copy of your document, along with a copy this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole Corporate Specialist New Filings Section

Letter Number: 903A00006622

RE-SUBMITPLEASE OBTAIN THE ORIGINAL
FILE DATE

CAPITAL	CONNECTION	850 222 1222	01/28	03 15:53 NO.9	86 03/03
In con <u>ART</u> The no	ICLES OF INCOmpliance with Chapte ICLE I NAME The of the corporation DELALUZ INCO	r 607 and/or Chapter 62	l, F.S. (Profit)	- - -	03 JAN 31 PM 1:39 SECRETARY LF STATE TALLAHASSEE FLORIDA
ART	CLE II PRINC	IPAL OFFICE			
The pr		ess/mailing address is:	Orlando,	florida	32818
The p	-	ose corporation is organized Shelving	l is:		
ART	CLE IV SHAL amber of shares of sto	ses			
ARTI	CLE V INITIA	L OFFICERS/DIREC	TORS (optiona	Ų	
	eme(s), address(es) as	nd title(s)			
2	2966 Gobe	nrack dr. C	Orlando,-	fior:da	32818
		HSTERED AGENT			
		et address of the registe	ered agent is:		
	uid Eduar	1 2 1 3 3			
29	66 Goldenn	ock dr. 0	rlanda, fi	orida 32	2818
	CLE VII INCO	RPORATOR		·	
	wid Edwar				
29	766 Golden	rock of C)rlando, Fi	orida 37	2818
	هند برگار خاک برگار دارد جای بختر بختر شد. باشد خاک خان برگار خان برگار خان برگار باشد با	and the contract of the contra			

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 cepacity

David E. Casey

Signature/Registered Agent

David E. Casey

Jao 03

Date

David E. Casey

Jao 03

Date