

PO300042719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

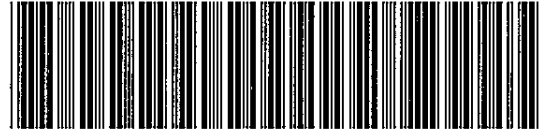
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

RECEIVED  
03 APR 16 AM 11:51  
DIVISION OF CORPORATION



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04/16/03--01051--005 \*\*70.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
03 APR 16 PM 1:33

APR 16 2003

# CAPITAL CONNECTION, INC.

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

TCB Tools Inc

Signature

Requested by

Name

Date

Time

Walk-In

Will Pick Up

✓ 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

Annual Report / Reinstatement

Cert. Copy

Photo Copy

Certificate of Good Standing

Certificate of Status

Certificate of Fictitious Name

Corp Record Search

Officer Search

Fictitious Search

Fictitious Owner Search

Vehicle Search

Driving Record

UCC 1 or 3 File

UCC 11 Search

UCC 11 Retrieval

Courier

**ARTICLES OF INCORPORATION**  
**OF**

T.C.B. Tools, Inc.

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

**ARTICLE I NAME**

The name of corporation shall be:

T.C.B. Tools, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

23227 Jacobson Rd  
Brooksville, FL 34601

**ARTICLE III CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Hundred (100)

**ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is:

Allen Bell  
23227 Jacobson Rd  
Brooksville, FL 34601

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## **ARTICLE V OFFICER(S)**

The name(s), street address(es), and title(s) of the initial officer(s) of this corporation shall be:

### **President**

Allen Bell  
23227 Jacobson Rd  
Brooksville, FL 34601

## **ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Allen Bell  
23227 Jacobson Rd  
Brooksville, FL 34601

The undersigned has(have) executed these Articles of Incorporation this 15th day of April, 2003.

Allen Bell Pres.  
Signature/Title

\_\_\_\_\_  
Signature/Title

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

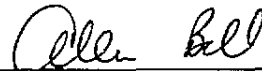
1. The name of the corporation is: T.C.B. Tools, Inc.
2. The name and address of the registered agent and office is:

Allen Bell  
(Name)

23227 Jacobson Rd  
(P.O. Box NOT Acceptable)

Brooksville, FL 34601  
(City/State/Zip)

SIGNATURE \_\_\_\_\_



(corporate officer)

TITLE President

DATE April 15, 2003

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TALLAHASSEE, FLORIDA  
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HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE \_\_\_\_\_



DATE April 15, 2003

REGISTERED AGENT FILING FEE: \$35.00