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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

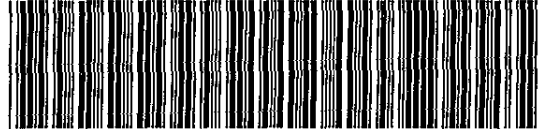
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 MAY 16 AM 8:06

F. CHESLER MAY 27

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TRANSMITTAL LETTER

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

SUBJECT: TAMI PHILLIPS PROCESSING INC
(PROPOSED CORPORATE NAME - **MUST INCLUDE SUFFIX**)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: TAMI PHILLIPS
Name (Printed or typed)

2828 VISTA PALM DRIVE
Address

EDGEWATER, FLORIDA 32141
City, State & Zip

386-424-1632
Daytime Telephone number

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

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:

TAMI PHILLIPS PROCESSING, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2828 VISTA PALM DRIVE
EDGEWATER, FL 32141

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROCESSING BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

TAMI PHILLIPS 2828 VISTA PALM DRIVE EDGEWATER FL 32141 (PRESIDENT)

ROGER PHILLIPS 2828 VISTA PALM DRIVE EDGEWATER FL 32141 (VICE-PRESIDENT)

ARTICLE VI REGISTERED AGENT

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

TAMI PHILLIPS
2828 VISTA PALM DRIVE
EDGEWATER, FL 32141

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TAMI PHILLIPS
2828 VISTA PALM DRIVE
EDGEWATER, FL 32141

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

Tami Phillips

Signature/Registered Agent

5-13-03

Date

Tami Phillips

Signature/Incorporator

5-13-03

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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