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DIVISION OF COMPORATION

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TRANSMITTAL LETTER

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

SUBJECT: TBM+NE CORP. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
	·		-	
Enclosed is an origin	nal and one(1) copy of the artic	les of incorporation and a	check for:	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Jason Matthews Name (Printed or typed) 515 E-Carolina 5t Address				
		. F. 3230 , State & Zip	<u> </u>	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I The name of the corporation shall b-JBM +NE, CORP. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 515 E. Carolina St Tallahassee FL 32303 ARTICLE III PURPOSE The purpose for which the corporation is organized is: The number of shares of stock is: ARTICLE_V _INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): THSON Matthews 515 E. Carolina St Tallahassee FL, 32303 REGISTERED AGENT The name and Florida street address of the registered agent is: Joson Matthews

Signature/Incorporator

515 E. Carolina st

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ARTICLES OF INCORPORATION

<u>1-/7-03</u> Date