

P03000151951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

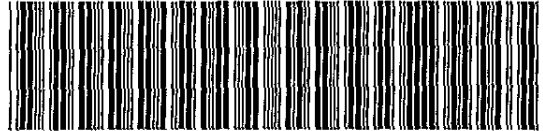
(Document Number)

Certified Copies _____ Certificates of Status _____

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Lisa Darbro GAVE
AUTHORIZATION BY PHONE TO
CORRECT Art. VI
DATE 12/14/03
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Office Use Only



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SECRET
TALLAHASSEE, FLORIDA

03 DEC -9 PM 3:30

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TRANSMITTAL LETTER

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

Maintenance, Inc.

SUBJECT: Tom's Home and Commercial[^]
(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:

Lisa Darbro
Name (Printed or typed)

5101 N.W. 21st Ave #200
Address

Fort. Lauderdale, FL 33309
City, State & Zip

954-735-8770
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:

Tom's Home and Commercial Maintenance, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 5074

Pompano Beach, Fl. 33074

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Tom Gibbs
c/o Lisa Dargo
5101 NW 21st Ave #200
Fort Lauderdale, FL 33309

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

Tom Gibbs
P.O. Box 5074
Pompano Beach, Fl. 33074

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tom Gibbs
P.O. Box 5074
Pompano Beach, Fl. 33074

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

X Tom Gibbs
Signature/Registered Agent

10-1-03
Date

X Tom Gibbs
Incorporator

10-1-03
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 DEC -9 PM 3:30

FILED