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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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TRANSMITTAL LETTER

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

SUBJECT: TOM	'S SCREEN REPAIRS2, INC.			
	(PROPOSEĎ CORPORA)	te name – <u>Must incl</u>	UDE SUFFIX)	
Enclosed is an origina	al and one(1) copy of the articles	s of incorporation and a c	check for :	
☐ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	THOMAS A SMITH			
	Name (Pr	inted or typed)		
433 54TH STREET				
Address WEST PALM BEACH, FL 33407				
City, State & Zip				
561-841-2693				
Daggine Telephone number				

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 12, 2004

THOMAS A. SMITH 433 54TH ST WEST PALM BEACH, FL 33407

SUBJECT: TOM'S SCREEN REPAIRS2, INC.

Ref. Number: W04000001480

We have received your document for TOM'S SCREEN REPAIRS2, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person listed as incorporator and the person signing as incorporator must be the same.

Please return the original and one copy of your document, along with a copy of 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) 245-6884.

Letter Number: 304A00001932

Shawn Logan Document Specialist New Filings Section

Division of Corporations - P.O. ROY 6327 Tallahassaa Florida 32314

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 SCREEN REPAIRS2, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

433 54TH STREET
WEST PALM BEACH, FL. 33407

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SEFVICE/ FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

MR. THOMAS A. SMITH 433 54TH STREET WEST PALM BEACH, FL. 33407

ARTICLE VI REGISTERED AGENT

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

MR. THOMAS A. SMITH 433 54TH STREET WEST PALM BEACH, FL. 33407

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

MR. JOEL SCHWEFEL 5369 OAKMONT VILLAGE CIRCLE WEST PALM BEACH, FL. 33463

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

Signature/Registered Agent

Signature/Incorporator

1/21/03 Date 1/16/04 1/29/03

04 JAN 27 PM 12: 12
SECRETARY OF STATE
TALLAMASSEE, FLORIDA