

P04000042485

(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



900028933469

02/23/04--01078--005 **78.75

EFFECTIVE DATE

3-15-04

FILED

04 MAR -9 PM 4:00

FILED

FILED

~~1001 0220~~

43-9

TRANSMITTAL LETTER

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

SUBJECT: _____

TPS, 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
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: _____

Robert Cannata

Name (Printed or typed)

950 S. Tamiami Tr, Ste 100

Address

Sarasota, Florida 34236

City, State & Zip

(941) 957-0833

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 27, 2004

ROBERT CANNATA
950 S TAMiami TR
STE 100
SARASOTA, FL 34236

SUBJECT: TPS, INC.
Ref. Number: W04000008325

We have received your document for TPS, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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.

Shawn Logan
Document Specialist
New Filings Section

Letter Number: 604A00013256

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: Touch Point Strategies, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 950 Tamiami Trail South
Suite 100
Sarasota, Florida 34236-7840

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Sell and/or Lease Interactive Kiosk
Systems

ARTICLE IV SHARES

The number of shares of stock is: 100,000

EFFECTIVE DATE

3-16-04

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Robert Cannata
President
950 Tamiami Trail South
Suite 100
Sarasota, Florida 34236

ARTICLE VI REGISTERED AGENT

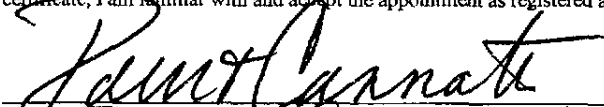
The name and Florida street address of the registered agent is: Robert Cannata
950 Tamiami Trail S.
Suite 100
Sarasota, FL 34236

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Robert Cannata
950 Tamiami Trail S.
Suite 100
Sarasota, FL 34236

Effective Date: March 15, 2004

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 of Registered Agent

3/4/04

Date



Signature of Incorporator

3/4/04

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAR -9 PM 4:00

FILED