

P04000062821

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2004 APR 14 A 13:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

~~1004-12655~~

## TRANSMITTAL LETTER

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

SUBJECT: \_\_\_\_\_

TOMA 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: \_\_\_\_\_

TOMA SHEPERD

Name (Printed or typed)

697 NE 36<sup>th</sup> Street

Address

Oakland Park FL 33334

City, State & Zip

561-654-6364

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 31, 2004

TOMA SHEPERD  
697 NE 36TH STREET  
OAKLAND PARK, FL 33334

SUBJECT: TOMA INC.  
Ref. Number: W04000012615

We have received your document for TOMA INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

The document number of the name conflict is P99000085573.

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) 245-6934.

Loria Poole  
Document Specialist  
New Filings Section

Letter Number: 004A00021190

RECEIVED  
04 APR 14 PM 3:12  
TALLAHASSEE, FLORIDA

**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:

TOMA SI TOUCH INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

697 NE 36th Street  
Oakland Park FL 33334

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Profit

**ARTICLE IV SHARES**

The number of shares of stock is:

100 shares \$1.00 pc.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Toma Sheperd (president)  
697 NE 36th Street  
Oakland Park FL 33334

**ARTICLE VI REGISTERED AGENT**

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

Toma Sheperd  
697 NE 36th Street  
Oakland Park FL 33334

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Toma Sheperd  
697 NE 36th Street  
Oakland Park FL 33334

\*\*\*\*\*

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

Toma Sheperd  
Signature/Registered Agent

3/16/04  
Date

Toma Sheperd  
Signature/Incorporator

3/16/04  
Date

2004 APR 14 A 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED