

PO4000079522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

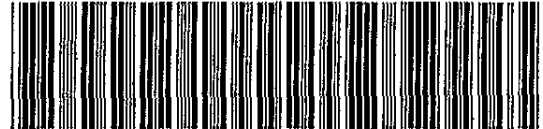
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04 MAY 17 PM 4:49
TALLAHASSEE, FLORIDA

✓
5/18/04

TRANSMITTAL LETTER

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

SUBJECT: TOTAL BUSINESS ADVANTAGE 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: VINCENT L. SHINHOLSTER
Name (Printed or typed)
424 E. CENTRAL BLVD Suite 120
Address
ORLANDO FL 32801
City, State & Zip
407-927-0405
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:

TOTAL BUSINESS ADVANTAGE INC

04 MAY 17 PM 4:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

424 E. CENTRAL BLVD Suite 120
Orlando FL, 32801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Small Business Consulting

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Vincent L. Shinholster (President)

ARTICLE VI REGISTERED AGENT

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

Vincent L. Shinholster
424 E. CENTRAL BLVD Suite 120 Orlando FL, 32801

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Vincent L. Shinholster
424 E. CENTRAL BLVD Suite 120 Orlando FL, 32801

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

Vincent L. Shinholster

Signature/Registered Agent

5-14-04

Date

Vincent L. Shinholster

Signature/Incorporator

5-14-04

Date