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| PICK-UP WAIT MAIL | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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TRANSMITTAL LETTER

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

| SUBJECT: 7 | TNER SERV (PROPOSED CORPOR | icas Inc | | | |
|----------------------|--|-------------------------------------|--|--|--|
| | (PROPOSED CORPORA | ATE NAME – <u>MUST INCLU</u> | <u>IDE SUFFIX</u>) | | |
| | | | | | |
| Enclosed are an orig | ginal and one (1) copy of the ar | ticles of incorporation and | a check for: | | |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | \$\frac{\times}{2} \\$87.50 Filing Fee, Certified Copy & Certificate of Status | | |
| | | ADDITIONAL CO | - 1 | | |
| FROM: | William Tywa | (Printed or typed) | | | |
| 5053 Liniag Ava, | | | | | |
| | ORIANDO F | 7. 32508 State & Zip | - | | |
| 1107 202 (100 | | | | | |

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) | 1 г. н т. пре туда Зата, ус. 18 |
|--|--|
| ARTICLE I NAME | Ot (61) |
| The name of the corporation shall be: | 04 JUL -9 PM 3:42 |
| TYNER GERVICES FACE | Part of the Part of |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: | |
| ORIANDO F! 32808 | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | |
| Bry AND All LAWFUL BUSSINESS | |
| ARTICLE IV SHARES The number of shares of stock is: | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS | |
| List name(s), address(es) and specific title(s): William Tyner President | |
| William Typer 5053 Lining over Opport 5053 Lining over | - |
| ARTICLE VI REGISTERED AGENT | |
| The name and Florida street address of the registered agent is: | |
| William TYNER 5053 Liming AVE | |
| William /gm Chill, Sales | |
| ARTICLE VII INCORPORATOR | |
| The name and address of the Incorporator is: | |
| Willow Tipe 5053 Living AVE OR 1. F. 37.808 *********************************** | |
| ************************************** | ************************************** |
| Welliam Topa | 7/6/04 |
| Signature/Registered Agent | Date |
| William Jeggendon | 7/6/04 |
| Signature/Incorporator | Date ' |