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TRANSMITTAL LETTER

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

Tic Tonic Corp.

Enclosed is an o	original and two (2) copies	of the articles of incorpo	ration and a check for	
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
		(ADDITIONAL COPY REQUIRED)		

FROM:

Subject

Nellie Akalp

Name

30141 Agoura Rd., Suite 205,

Address

Agoura Hills, California 91301

City, State & Zip

818-879-9079

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

ARTICLES OF INCORPORATION OF Tic Tonic Corp.

	-			
	rator, for the purpose of forming a corporation under the Flo	orida business Ç	orpora	tion
Act, hereby adopts the fo	llowing articles of incorporation.	f		운
ARTICLE_L	NAME	<u> </u>	呈示	SEP 17
	oration shall be: Tic Tonic Corp.	Ć	SE	
_		Ţ	\mathbb{H}_{\subseteq}	70
ARTICLE II	PRINCIPAL OFFICE	Ţ	黑宝	
The principal place of	business and mailing address of this corporation shall b	e: \$	즐길	PM 12: 03
248 Hunt Stree	et	3	> "	ದ
Clermont, Flor	rida 34711			
ADTICLE III	CHADEC			
ARTICLE III The number of shares i	SHARES that this corporation is authorized to have outstanding a	t any one time	is: 1.50	Ò0 at
\$0.01 par value per sha		· ····		
ADDITION TO THE	DIGGE AT DEPOSITORS			
	INITIAL DIRECTORS			
The name(s) and addre	ess(s) of the initial Director(s) is/are:			
Modean Khan				
248 Hunt Stree				
Clermont, Flor	rida 34711			
ARTICLE V	INITIAL REGISTERED AGENT AND STR	REET ADDI	RESS	i
	street address of the initial registered agent is:			
Madan Man				
Modean Khan 248 Hunt Stree				
Clermont, Flor				
,				
ARTICLE VI	<u>INCORPORATOR</u>			
The name and address	of the incorporator to these Articles of Incorporation is:			
Nellie Akalp				
	Rd., Suite 205			
_	California 91301			
1000	$\frac{\partial}{\partial x} \frac{\partial}{\partial x} \frac{\partial}$	()		
Nallia Al	alp, Incorporator/	7 Date		—
	arp, moorporator, egistered agent and to accept service of process for the above		tion at i	the
place designated in this	certificate, I hereby accept the appointment as registered age	nt and agree to t	act in th	his
capacity. I further agree	to comply with the provisions of all statutes relating to the pr	oper and compl	lete	14 t
performance of my dutie	a, and I am familiar with and accept the obligations of my po	sidon as register	·ea age	<i>.</i>
11/ode	an 10han 9/12/	04		
Modean Kha	n Registered Agent	Date		