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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

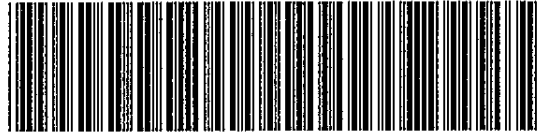
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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12-29

JOSEPH A. GUGINO, ATTORNEY at LAW

P.O. Box 495775, Port Charlotte, FL 33949

941-661-3400 * Fax 941-613-1186

FAX COVER SHEET

Date: 12/27/04

TO: Division of Corporations

RE: ① Corporate Filing
② LLC Filing

NUMBER OF PAGES

Including cover page

MESSAGE:

Enclosed Find ^① Articles of
Incorporation for TY-CON
Enterprises, Inc. and ^② Articles of
Organization for Florida Limited
Liability Company for TY-CON
Enterprises, LLC.

Thank you in advance.

04 DEC 29 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: TY-CON ENTERPRISES, 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: JOSEPH A. GUGINO

Name (Printed or typed)

P.O. BOX 495775

Address

PORT CHARLOTTE, FL 33949

City, State & Zip

941-661-3400

Daytime Telephone number

04 DEC 29 PM 12:55
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

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:

TY-CON ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

22103 Breezeswept Ave., Pt. Charlotte, FL 33952

Mailing address: P.O. Box 495775, Pt. Charlotte, FL 33949

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation shall have all of the powers which are now or which may hereafter be conferred upon Corporations by the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joseph A. Gugino
P.O. Box 495775
Pt. Charlotte, FL 33949
Initial Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

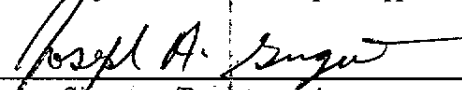
Joseph A. Gugino
80 Norman Street
Pt. Charlotte, FL 33954

ARTICLE VII INCORPORATOR

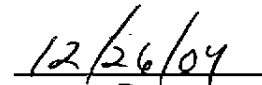
The name and address of the Incorporator is:

Joseph A. Gugino
P.O. Box 495775
Pt. Charlotte, FL 33949

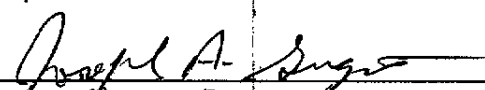
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



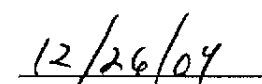
Signature/Registered Agent



Date



Signature/Incorporator



Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA