200041416

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL.		
(Business Entity Name)				
	·····			
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



200065697582

02/14/06--01005--001 **70.00

NO6-7780

TRANSMITTAL LETTER

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

SUBJECT: TCPI, I	NC. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PY REQUIRED
FROM: Jas	son Wong		
	Name	(Printed or typed)	
	10151 University Blvd, suite 120		
		Address	
;	Oriando, Florida 32875		
	City	, State & Zip	- ·
	212 561 0762		
	Daytime 1	elephone number	

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



February 17, 2006

JASON WONG 10151 UNIVERSITY BLVD SUITE 120 ORLANDO, FL 32875

SUBJECT: THE JOCKEY CLUB, INC.

Ref. Number: W06000007780

We have received your document for THE JOCKEY CLUB, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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) 245-6931.

Becky McKnight Document Specialist New Filing Section

Letter Number: 406A00011446

06 MAR 22 PM 12

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:

TCPI, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: #404, SUITE 212 4250 ALAFAYA TRAIL OVEIDO, FLORIDA 32765

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: HOLDING COMPANY

ARTICLE IV SHARES

The number of shares of stock is: 100,000,000 PAR VALUE \$0.001

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOHN SPARROW #404, SUITE 212 4250 ALAFAYA TRAIL OVEIDO, FLORIDA 32765

ARTICLE VI REGISTERED AGENT

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

JOHN SPARROW #404, SUITE 212 4250 ALAFAYA TRAIL OVEIDO, FLORIDA 32765

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOHN SPARROW #404, SUITE 212 4250 ALAFAYA TRAIL OVEIDO. FLORIDA 32765

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

1h for	03/18/2006
Signature/Registered Agent	Date
after for	03/18/2006
Signature/Mcorporator	Date