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## **COVER LETTER**

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06 DEC 11 PM 3: 05

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

# SUBJECT: TAMAJ UNITED, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

Filing Fee

✓ \$78.75 Filing Fee & Certificate of Status

\$78.75	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status

ADDITIONAL COPY REQUIRED

FROM: M. J. NOONE

Name (Printed or typed)

**15203 HARBOUR ISLE DRIVE** 

Address

FORT MYERS, FL 33908

City, State & Zip

407-466-4652

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)

### <u>ARTICLE I NAME</u>

The name of the corporation shall be: TAMAJ UNITED, INCORPORATED

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

15203 HARBOUR ISLE DRIVE FORT MYERS, FL 33908

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FREELANCE WRITING + PUBLISHING

### ARTICLE IV SHARES

The number of shares of stock is: 50,000

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

M. J. NOONE- CO-OWNER- 15203 HARBOUR ISLE DR. FORT MYERS, FL 33908 T. A. NILES- CO-OWNER- 15203 HARBOUR ISLE DR. FORT MYERS, FL 33908

### ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is: T.A. NILES- 15203 HARBOUR ISLE DR. FORT MYERS, FL 33908

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

M. J. NOONE- 15203 HARBOUR ISLE DR. FORT MYERS, FL 33908

\*

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

gnature/Incorporator Joone

12/06/2007 Date 12/06/2007

Date

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SECRETARY OF STATE TALLAHASSEE, FLORIDA