

P07000000497

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

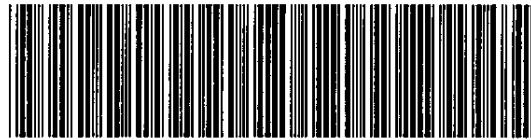
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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WUB-50094

FILED  
2007 JAN - 2 PM 4: 00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

L Burch JAN 2 2007

## COVER LETTER

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

SUBJECT: TEAR DROP Construction  
(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: Antoine Branch  
Name (Printed or typed)

182 Jocelyn Drive  
Address

Davenport Fla 33899  
City, State & Zip

1-863-420-3499  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 29, 2006

ANTOINE BRANCH 2ND ML  
16430 NELSON PK DR  
CLERMONT, FL 34714

SUBJECT: TEAR DROP CONSTRUCTION CORPORATION  
Ref. Number: W06000050094

We have received your document for TEAR DROP CONSTRUCTION CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

Please return 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) 245-6928.

Tim Burch  
Document Specialist

Letter Number: 706A00066902

**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: "Team Drop, Construction, Corp."

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: 182 Jocelyn Drive Davenport Fla  
zip 33897

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Construction Clean up

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

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

President: Antoine Branch

Vice President Lawrence Solomon

Secretary: Nadia Solomon

Treasury: Jon Solomon

**ARTICLE VI REGISTERED AGENT**

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

Antoine Branch 182 Jocelyn Dr Davenport Fla  
zip 33897

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Antoine Branch 182 Jocelyn Drive Davenport Fla

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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

me Antoine Branch   
Signature/Registered Agent

12-15-06  
Date

Antoine Branch - Antoine Branch  
Signature/Incorporator

12-15-06  
Date

FILED  
2007 JAN - 2 PM 4: 00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA