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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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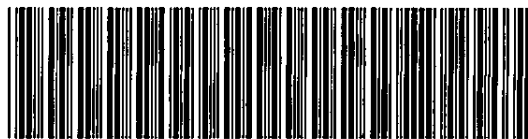
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/27/07--01008--007 **87.50

FILED
2007 APR 27 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Hampton APR 27 2007

COVER LETTER

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

SUBJECT: T-N-T Academy of Judo and Dance, Inc.

Enclosed is an original and two (2) copies of the articles of incorporation and a check for:
\$87.50 in payment of the Filing Fee, a Certified Copy and a Certificate of Status.

FROM: Christine Ferry
12628 Bramfield Drive
Riverview, FL 33569
813-671-4815

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:
T-N-T Academy of Judo and Dance, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
12628 Bramfield Drive
Riverview, FL 33569

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To provide instruction in Judo and Dance to adults and children.

ARTICLE IV SHARES

The number of shares of stock is:
3,200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Christine Ferry, President
12628 Bramfield Drive
Riverview, FL 33569

Scott Ferry, Vice President
12628 Bramfield Drive
Riverview, FL 33569

Tylor Ferry, 1st Vice President
12628 Bramfield Drive
Riverview, FL 33569

Tiffany Ferry, Treasurer
12628 Bramfield Drive
Riverview, FL 33569

Jennifer Thomas, Secretary
12620 Bramfield Drive
Riverview, FL 33569

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ARTICLE VI REGISTERED AGENT

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

Christine Ferry
12628 Bramfield Drive
Riverview, FL 33569

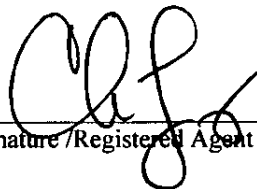
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Christine Ferry
12628 Bramfield Drive
Riverview, FL 33569

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Having been named as registered agent to a 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.



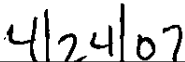
Signature/Registered Agent



Date



Signature/Incorporator



Date