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SECRETARY OF STAIL OT ALLAHASSEE. FLORIDA

DCPATTY OF STATE

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COVER LETTER

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

of FIA.

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for:

\$70.00 Filing Fee

\$78.75

Piling Fee Filing Fee &

Certificate of Status

\$78.75

\$87.50

& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

Name (Printed or typed)

786 - 488 - 1279 Daytime Telephone number

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

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME	
The name of the corporation shall be:	
Total Oppurtury DEVELOMENT OF FLORIDA	INC
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
read all of TAVE	
5800 N.W. 71200 Min, 9/1 33142	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
	TAS C
Work force, Statting, training, Etc	O7 AUG SECRET
ARTICLE IV MANNER OF ELECTION	G-2 PM 5: 00 TARY OF STATE AASSEE, FLORIDA
The manner in which the directors are elected or appointed:	SEA 1
Appointing Them	Es in C
	DR O
	0,00
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS	ļ.
List name(s), address(es) and specific title(s):	
Anhonio Brinson C.E.O /P.D	
FREDDIE BRINSON PIR. /CS.S. ANTONIO BRINSON VPD	
ANTONIO BAINGON UPD	
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is	S :
Autorio Brinson	
2504 N.W. 73 +ERR Min, 7/m 3314	
2304 M.W. 13 - MIN; 7/14 3314	7
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
B. Antonic Bajuson	
2504 N.W. 93 + ER Min, Pla 3319	シア
*******************	******
	he place designated
in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in	
DA , 3 5 1	/ /
Union I- Dueson 3/2	2/07
Signature/Registered Agent Date	/

Signature/Incorporator