

PO7000095388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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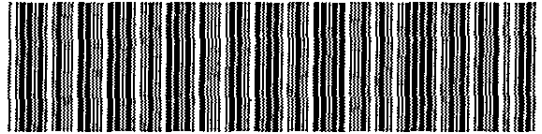
(Business Entity Name)

(Document Number)

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

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07/16/07--01049--006 \*\*78.75

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07 AUG 24 AM 9:4-

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten signature*

## COVER LETTER

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

SUBJECT: Tone 2 Day Incorporated  
(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: Andraya E Torres  
Name (Printed or typed)

801 Jacaranda Dr.  
Address

Oldsmar, FL 34677  
City, State & Zip

823 727-504-7998  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 31, 2007

ANDREYA E TORNES  
801 JACARANDA DR  
OLDSMAR, FL 34677

SUBJECT: TONE 2 DAY INCORPORATED  
Ref. Number: W07000034220

We have received your document for TONE 2 DAY INCORPORATED 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 person designated as registered agent in the document and the person signing as registered agent must be the same.

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 850-245-6052.

Paisley A Alford  
New Filing Section  
Division of Corporations

Letter Number: 007A00045318

# 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:

Tone 2 Day Incorporated

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

801 Jacaranda Dr.  
Oldsmar, FL 34677

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

In-home Personal Training  
Personal Training

## ARTICLE IV SHARES

The number of shares of stock is:

500

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President Andruya E Tornes  
Vice-President Larry C Tornes

## ARTICLE VI REGISTERED AGENT

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

Larry Tornes 801 Jacaranda Dr.  
Oldsmar, FL 34677

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Andruya Tornes 801 Jacaranda Dr.  
Oldsmar, FL 34677

\*\*\*\*\*

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

Date

Signature/Incorporator

Date

FILED  
07 AUG 24 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA