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SECRETARY OF STATE

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## **COVER LETTER**

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

Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:	
□ \$70.00	\$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
-	& Certificate of Status	& Certified Copy	Certified Copy	
	**		& Certificate of	
	- 1 tan's		Status	
		ADDITIONAL COPY REQUIRED		

FROM: CINDY TOMKINS Name (Printed or typed)	
, Name (Frinted or typed)	
4186 CR 317B	
Address	
Bushell, 1/2 33513	
City, State & Zip	
352-457-1030	
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)

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<u>ARTICLE I NAME</u>

The name of the corporation shall be:

2008 JAN -3 PM 4: 07

CINDY TOMPKINS, INC.

SECRETARY OF STATE TALLAHASSEE. FLORIDA

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4186CR 317B Bushnell, 4.33513

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate Agent

# 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):

Cindy Tompkius, President

FILED

AKJICLE VI	REGISTERED A	<u>GEN I</u>		000-	
The name and Flor	<u>ida street address</u> (P.	O. Box NOT acceptable	) of the registered ager	nt is: UUB JAN -3	Рм
C11149 1011	11 p 10.100			SECRETARY	17 4:07
4186 CR 31 Bushnelli 3	78			SECRETARY OF TALLAHASSEE.	FSTATE
Bushnell,	H. 33512				, FORIDA
	INCORPORATOR	₹			
	<u>ress</u> of the Incorporato	r is:			
CINDY TOMPK	ins				
CINDY TOMPK	B				
Busmell,	H. 33513			****	e ske ske ske
		t service of process for the a intment as registered agent o			in this
Signature	ollin Lindy Registered Agent	TompKins	<u> 12-</u>	<u>31-07</u> Date	
Signature	ling Lindy e/Incorporator	Tompkins	<u>/d-</u> ;	31-07 Date	

VIII Effective date of incorporation 15: December 31, 2007