Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000005871 3)))



H080000058713A8C\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CSH SERVICES, LLC Account Number : I20070000160 Fhone : (800)494-3124

Fax Number : (561)455-9885

FLORIDA PROFIT/NON PROFIT CORPORATION

TNLL INC

Certificate of Status	0
Certified Copy	. 0
Page Count	02
Estimated Charge	\$70.00

2008 JAN -8 - AH II: 59
SECRETARY OF STATE
SECRETARY OF STATE

Electronic Filing Menu

Corporate Filing Menu

1/9-

1/8/2008 5:40 PM

H080000058713

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:

TNLL INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1917 BLUE RIDGE DRIVE

JACKSONVILLE, FLORIDA 32246

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

PRESIDENT:

TROY D LEWIS

1917 BLUE RIDGE DRIVE

JACKSONVILLE, FLORIDA 32246

VICE-PRESIDENT:

LIZBETH D REYES

1917 BLUE RIDGE DRIVE

JACKSONVILLE, FLORIDA 32246

2008 JAN -8 AHII: 59
SECRETARY OF STATE
AND ANASSEF, FLORIDA

H080000058713

4080000058713

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

TROY D LEWIS

1917 BLUE RIDGE DRIVE

JACKSONVILLE, FLORIDA 32246

ARTICLE VII . INCORPORATOR

The name and Florida street address of the incorporator is:

TROY D LEWIS

1917 BLUE RIDGE DRIVE

JACKSONVILLE, FLORIDA 32246

Having been named as registered agent to accept service of process for the above 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.

TROY D'LEVVIS REGISTERED AGENT

DATE

TROY D LEWIS TINCORPORATOR

07/08

ATE

.008 JAN -8 ::: II: S

H080000058713