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· COVER LETTER

SECRETARY OF STATE DIVISION OF CORPORATIONS

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

1 41141140000, 1 20 20 20			
SUBJECT: TOP LIN	NE SPECIALISTS, INC. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: <u>LIN</u>	NDA PICKWICK Name	(Printed or typed)	
	2501 ADLER COURT	Address	
	THE VILLAGES, FL 32162 City	y, State & Zip	
	352-350-2236	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)

SECRETARY OF STATE DIVISION OF CORPORATIONS

08 SEP 22 PH 1:25

ARTICLE I NAME

Committee of

The name of the corporation shall be:

TOP LINE SPECIALISTS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 2501 ADLER COURT

THE VILLAGES, FL 32162

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CONSULTING SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 500 SHARES OF COMMON STOCK

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): LINDA PICKWICK, PRESIDENT 2501 ADLER COURT THE VILLAGES, FL 32162

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: LINDA PICKWICK 2501 ADLER COURT THE VILLAGES, FL 32162

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: LINDA PICKWICK 2501 ADLER COURT THE VILLAGES, FL 32162

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

X Signature/Registered Agent

Signature/Incorporator

9/1/08

Date