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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

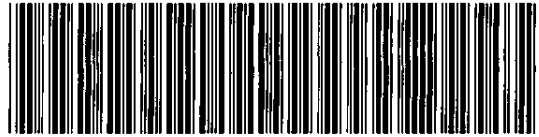
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: TAMI, INC.

(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: MILAGRO DEL C. FAUST

Name (Printed or typed)

8130 W. WATERS AVE. 300-B

Address

TAMPA, FLORIDA 33615

City, State & Zip

813-886-3895

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)

ARTICLE I NAME

The name of the corporation shall be:

TAMI, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

8130 W. WATERS AVE. STE. 300-B
TAMPA, FLORIDA 33615

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO TRANSACT ANY LAWFUL BUSINESS FOR WHICH CORPORATIONS MAY BE INCORPORATED
UNDER FLORIDA LAW

ARTICLE IV SHARES

The number of shares of stock is:

AUTHORIZED TO ISSUE 7500 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MILAGRO DEL C. FAUST, P/D
8130 W. WATERS AVE. STE. 300-B
TAMPA, FLORIDA 33615

ARTICLE VI REGISTERED AGENT

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

MILAGRO DEL C. FAUST
8130 W. WATERS AVE. STE. 300-B
TAMPA, FLORIDA 33615

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MILAGRO DEL C. FAUST
8130 W. WATERS AVE. STE. 300-B
TAMPA, FLORIDA 33615

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

Milagro Del C Faust

Signature/Registered Agent

Milagro Del C Faust

Signature/Incorporator

3/6/2009

Date

3/6/2009

Date

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