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(Address)

(Address)

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## COVER LETTER

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

**SUBJECT:** TM CONSULTING 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Thomas Miskela  
Name (Printed or typed)

10292 Islander drive  
Address

Boca Raton, FL 33498  
City, State & Zip

(561)-488-2401  
Daytime Telephone number

tmiskela@comcast.net  
E-mail address: (to be used for future annual report notification)

**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: **TM CONSULTING INC.**

### **ARTICLE II PRINCIPAL OFFICE**

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

10292 Islander drive  
Boca Raton, FL 33498

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ALL-PURPOSE

### **ARTICLE IV SHARES**

The number of shares of stock is:

10 shares

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Thomas Miskela  
10292 Islander Drive Boca Raton, FL 33498  
President

### **ARTICLE VI REGISTERED AGENT**

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

Thomas Miskela  
10292 Islander Drive  
Boca Raton, FL 33498

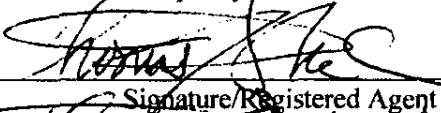
### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Thomas Miskela  
10292 Islander Drive  
Boca Raton, FL 33498

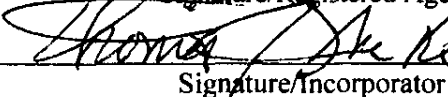
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

11/06/2009

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

11/06/2009

\_\_\_\_\_  
Date

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