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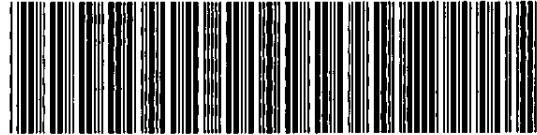
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12-1-09

## COVER LETTER

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

SUBJECT: T n TJ's Painting, 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

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status  
ADDITIONAL COPY REQUIRED

FROM: Tina Marie Kincaid  
Name (Printed or typed)

5340B Altoona St.  
Address

Sarasota, FL 34232  
City, State & Zip

941-822-3526  
Daytime Telephone number

tntpaintinginc09@yahoo.com  
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: T n TJ's Painting, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

5340 Altoona St.  
Sarasota FL 34232

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Painting & Cleaning Services

### ARTICLE IV SHARES

The number of shares of stock is: 1000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Tina M. Kincaid 5340B Altoona St. Sarasota, FL 34232 President  
Danielle L. Kincaid 4838 Las Vegas Dr. Sarasota, FL 34233 Vice President

### ARTICLE VI REGISTERED AGENT

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

Tina M. Kincaid 5340B Altoona St. Sarasota, FL 34232

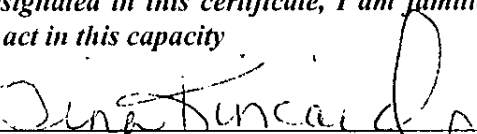
### ARTICLE VII INCORPORATOR

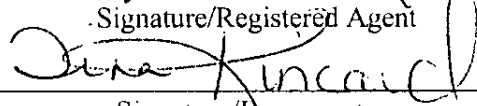
The name and address of the Incorporator is:

Tina M. Kincaid 5340B Altoona St. Sarasota, FL 34232

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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

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

Tina Kincaid

11/23/2009

\_\_\_\_\_  
Date

11/23/2009

\_\_\_\_\_  
Date

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