

P100000 10049

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2-3-10

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COVER LETTER

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

SUBJECT: TOP ROCK GROUP 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 checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: FRANK L. THOMPSON
Name (Printed or typed)

1395 SHADY KNOLL CT
Address

HOMERWOOD, FL 32750
City, State & Zip

(407) 923-9429
Daytime Telephone number

for Frank Thompson@toprockgroup@gmail.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: TOP ROCK GROUP INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 1395 SHADY KNOLL CT.
LONGWOOD, FL 32750.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: DATA TRANSFER

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): FRANK L. THOMPSON
PRESIDENT
1395 SHADY KNOLL CT.
LONGWOOD, FL 32750

ARTICLE VI REGISTERED AGENT

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

FRANK L. THOMPSON
1395 SHADY KNOLL CT.
LONGWOOD, FL 32750

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: FRANK L. THOMPSON
1395 SHADY KNOLL CT.
LONGWOOD, FL 32750

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

Date

Date

FILED

10 FEB - 2 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-29-10

1-29-10