

P10000089801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

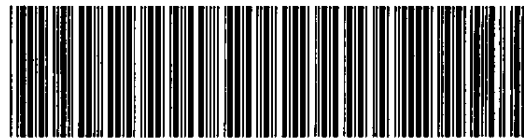
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100186724191

10/25/10--01019--002 **78.75

FILED
2010 NOV -4 P 4:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W1-50297
WCC

COVER LETTER

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

SUBJECT: TWA MASONRY 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: TWA MASONRY INC

Name (Printed or typed)

P O BOX 332

Address

SHALIMAR FL

City, State & Zip

850 240 8633

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 NOV -4 P 4: 49

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 26, 2010

TWA MASONRY INC
P. O. BOX 332
SHALIMAR, FL 32579

SUBJECT: TWA MASONRY INC
Ref. Number: W10000050297

We have received your document for TWA MASONRY INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham
Regulatory Specialist II
New Filing Section

Letter Number: 710A00025285

TUCK APLIN HAD A CORP 104 for state
under TWA Maloney Inc.

Then shifted to TWA Maloney LLC which he needs
to keep.

He also needs TWA Maloney Inc. to keep as a Corp.

Please allow. Thank you from Paul Lobato CPA
850 862-1040

850 864-1040 FAX

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME TWA MASONRY INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

52 Fourth Avenue Apt 4
Shalimar Florida 32579

P.O. Box 332
Shalimar, Florida 32579

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To serve business and residential customers with masonry services
and any other light construction and renovation services

ARTICLE IV SHARES

The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Todd W Aplin President

Name and Title: _____

Address: P.O. BOX 332
SHALIMAR FLORIDA 32579

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: TODD W APLIN

Address: 52 FOURTH AVE APT 4
SHALIMAR FLORIDA 32579

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: TODD W APLIN

Address: 52 FOURTH AVE APT 4
SHALIMAR FLORIDA 32579

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.

Todd Wayne Aplin
Required Signature/Registered Agent

OCTOBER 1, 2010
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Todd Wayne Aplin
Required Signature/Incorporator

OCTOBER 1, 2010
Date

FILED
200 NOV - 4 P 4: 49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA