# P12000002779

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	****

Office Use Only

691-6429-W11000061392



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12/06/11--01011--007 \*\*78.75

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\$ 1/10/12

### **COVER LETTER**

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

SUBJECT: T.N.T. HOWE IMPROVEMENTS, CONJUMN (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 & Certificate of Status  **ADDITIONAL COPY REQUIRED**  **Enclosed are an original and one (1) copy of the articles of incorporation and a check for:  \$70.00 \$70.00 Filing Fee & Certified Copy & Certified Copy & Certificate of Status  **ADDITIONAL COPY REQUIRED**
FROM: Ruben A. Tölles  Name (Printed or typed)  13524 Turre HARSH Gop Linit 610  Address
Ollawos FL 32837 City, State & Zip
Daytime Telephone number
Daytime Telephone number  The provements a hot wait com  E-mail address: (to be used for future annual report notification)  NOTE: Please provide the original and one copy of the articles.



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

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CECAE FARY OF STATE TALLAHASSEE, FLORIDA

December 20, 2011

RUBEN A. TORRES 13524 TURTLE MARSH LOOP APT. 610 ORLANDO, FL 32837

SUBJECT: T.N.T. HOME IMPROVEMENTS CO.

Ref. Number: W11000061392

We have received your document for T.N.T. HOME IMPROVEMENTS CO. 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 must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 311A00028274



## FLORIDA DEPARTMENT OF STATE Division of Corporations

FILED

12 JAN -6 PM 4: 51

SELVIC TARY OF STATE
TALLAHASSEE, FLORIDA

December 7, 2011

RUBEN A. TORRES 13524 TURTLE MARSH LOOP APT. 610 ORLANDO, FL 32837

SUBJECT: T.N.T. HOME IMPROVEMENTS CO.

Ref. Number: W11000061392

We have received your document for T.N.T. HOME IMPROVEMENTS CO. 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 511A00027423

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

<u>ARTICLE II                                   </u>	<u> UNCIPAL OFFICE</u>		
	Principal street address		Mailing address, if different is:
135	24 Turtle HARSH Cop		
TOI	Unit 610 ANDO, FL 32837		7>
90	ANIO 1 1- 32.3.1		E.C. N
RTICLE III PU			JAN
	the corporation is organized is:		SA T
Ger	peral Home maintenance	_	- SSA 6 F
J			
			<b>4: 5</b> TAT ORIC
			DE DE
RTICLE IV SE	<u> </u>		
ne number of shares (	of stock is. 700		₹
	ITIAL OFFICERS AND/OR DIRECTORS		
Name and Title:	Ruben A Tornes, President	Name and Titl	le:
Address:	13524 TURKE HARSK COOP	_ Address:	
-	OMANDO FL 32837	-	
-		-	
			le:
Address:		Address:	
-		-	
-		•	
			le:
		Address:	
		•	
-		•	
	GISTERED AGENT		
•	street address (P.O. Box NOT acceptable) of	the registered ag	gent is:
Name: Address:		610	
Address.	ORLAND FL 32837	. 610	
		•	
RTICLE VII IN			
ne <u>name and addres:</u> Name:	s of the Incorporator is: Ruben A. TBRIES		
Address:	13504 Thatis House (ma Al	, -00	
Addiess.	13524 There Harist Cop Al		
		· •	
	registered agent to accept service of process		
is certificate, 1 am fa	hillar with and accept the appointment as region	stereu ugent und	t agree to act in this capacity
11//-			1/1/12
XX	Required Signature/Registered Agent		Date
_			Date
submit this docu <u>me</u> r	nt and affirm that the facts stated herein are	true. I am awar	re that the false information submitted in
aumant to the Dands	iment of State constitutes a third degree felony	as provided for	in s.817.155, F.S.
cument to the Delph			
cument to the Dept			1.1-