

P12000007433

(Requestor's Name)

THOMAS F. CAMPENNI  
700 S.W. St. Lucie Crescent  
Stuart, FL 34994

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

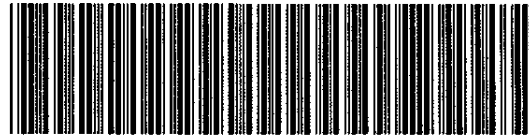
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

1/4

## COVER LETTER

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

SUBJECT: TFC CORP  
(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: T. THOMAS F CAMPENI  
Name (Printed or typed)

700 SW SAINT LUCIE CRESCENT  
Address

STUART FL 34994  
City, State & Zip

772 - 287-5781  
Daytime Telephone number

tfcrc @ AOL.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: TFC CORP.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

700 SW CLEVELAND AVE  
STUART FL 34994

Mailing address, if different is:

700 SW SAINT LUCIE CRES.  
STUART FLORIDA 34994

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

REAL ESTATE

**ARTICLE IV SHARES**

The number of shares of stock is: 200

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

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: THOMAS F. CAMDENI

Address: 700 SW SAINT LUCIE CRESCENT  
STUART FL 34994

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: THOMAS F. CAMDENI

Address: 700 SW SAINT LUCIE CRESCENT  
STUART FL 34994

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

HTC

Required Signature/Registered Agent

1/17/12

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.

HTC

Required Signature/Incorporator

1/17/12

Date