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(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special instructions to Filing Officer:			
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COVER LETTER

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

SUBJECT: The Teufel Hunden Group Incorporated (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$78.75 \$70.00 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Fred Carter Jr. Name (Printed or typed) 5796 Woodruff Way Address <u>Lakeland, Florida 33812</u> City, State & Zip 863-944-6599 Daytime Telephone number

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

deadgame36@msn.com

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

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

ARTICLE I The name of the co		Group Incorporated 12 JUL 23 PM 12: 17
ARTICLE II	PRINCIPAL OFFICE	Mailing address if different is
	Principal street address	Mailing address if different is
	5796 Woodruff Way	37 90 WOOdidii Way
T	akeland, FL 33812	Lakeland, FL 33812
-		· · · · · · · · · · · · · · · · · · ·
	hich the corporation is organized is:	pen small businesses or small business chains.
ARTICLE IV The number of share		
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	CTORS
	itle:Fred Carter Jr. CEO	
Address:	5796 Woodruff Way	
	Lakeland, FL 33812	
Name and Ti	itle:Virginia Hillerich - Manager	Name and Title:
Address:	5796 Woodruff Way	Address:
	Lakeland, FL 33812	
Name and Ti	itla	Name and Title:
Address:	title:	4 • •
radicss.		1 tudios.
		
	REGISTERED AGENT	
	rida street address (P.O. Box NOT accepta	
Name:	Fred Carter Jr.	
Address:	5796 Woodruff Way	
	Lakeland, FL 33812	
ARTICLE VII	INCORPORATOR	
	Iress of the Incorporator is:	
Name:	Ered Carter Jr	
Address:	5796 Woodruff Way	
	Lakeland, FL 33830	
Having been name this certificate, I ar	ed as registered agent to accept service of p m familiar with and accept the appointment	process for the above stated corporation at the place designated in as registered agent and agree to act in this capacity
	To To	July 18, 2012
1 rue	A Boguind Signature/Bogietand Again	
FIED 1	Required Signature/Registered Ager	nt Date
	ment and affirm that the facts stated here epartment of State constitutes a third degree	in are true. I am aware that the false information submitted in a felony as provided for in s.817.155, F.S.
	/ A T	lub 19 2012
- vue	Required Signature/Incorporator	July 18, 2012 Date
1-1	Required Signature/Incorporator	
ITEU C	Arter Ju	