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(Requestor's Name)

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(City/State/Zip/Phone #)

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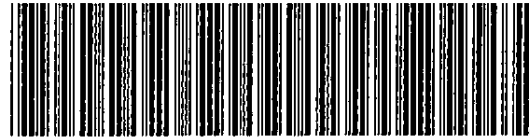
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
7/31/12

COVER LETTER

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

SUBJECT: Tucker Handsfree Communications 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: J. Vincent Demps
Name (Printed or typed)

3200 West End Avenue, Suite 500
Address

Nashville, Tennessee 37203
City, State & Zip

615-783-1623
Daytime Telephone number

vincent@masterchek.net
E-mail address: (to be used for future annual report notification)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Tucker Handsfree Communications Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
10960 SW 223rd Street
Goulds, Florida 33170

Mailing address, if different is:
1150 Olde Bailey Lane
c/o Nigille C. Stewart
West Melbourne, FL 32904

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To design, invent and provide handsfree equipment.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ron Tucker, President
Address: 10960 SW 223rd Street
Goulds, Florida 33170

Name and Title: J. Vincent Demps, Secretary
Address: c/o Nigille C. Stewart
1150 Olde Bailey Lane
West Melbourne, FL 32904

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: J. Vincent Demps
Address: c/o Nigille C. Stewart
1150 Olde Bailey Lane, West Melbourne, FL 32904

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Name: J. Vincent Demps
Address: c/o Nigille C. Stewart
1150 Olde Bailey Lane, West Melbourne, FL 32904

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


Required Signature/Registered Agent

7/24/12
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.


Required Signature/Incorporator

7/24/12
Date