

P12000088818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

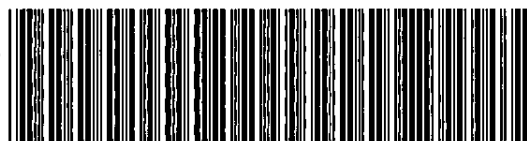
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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10/05/12--01022--006 \*\*78.75

W2-  
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FILED  
12 OCT 19 PM 4:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10/22/12  
B

## COVER LETTER

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

SUBJECT: TELECOM CONSULTING GROUP 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: JASON MOORE  
Name (Printed or typed)

2868 RIVER PINES WAY  
Address

SARASOTA FL 34231  
City, State & Zip

941-544-4216  
Daytime Telephone number

JAYSONMOO@YAHOO.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

RECEIVED  
12 OCT 19 AM 11:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

October 8, 2012

JASON MOORE  
2868 RIVER PINES WAY  
SARASOTA, FL 34231

SUBJECT: TELECOM CONSULTING GROUP INC.  
Ref. Number: W12000051408

We have received your document for TELECOM CONSULTING GROUP 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 complete the principal address in article II.

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) 245-6052.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 812A00024847

\* CORRECTIONS MADE.  
CHECKED SUNBIZ FOR NAME AVAILABILITY  
THIS NAME WAS INACTIVE.

3RD CHOICE IS  
"TELECOM CONSULTING GROUPS INC"  
MAIN CHOICE IN ARTICLE I  
www.sunbiz.org

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: TELECOMMUNICATIONS CONSULTING GROUP INC.  
~~TELECOM CONSULTING GROUP INC.~~

ARTICLE II PRINCIPAL OFFICE

Principal street address

2868 RIVER PINES WAY  
SARASOTA FL 34231

Mailing address, if different is:

- SAME -  
2868 RIVER PINES WAY  
SARASOTA FL 34231

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONSULTATION & SALES OF TELECOM SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JASON MOORE PRESIDENT Name and Title: \_\_\_\_\_

Address: 2868 RIVER PINES WAY Address: \_\_\_\_\_  
SARASOTA FL 34231

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: JASON MOORE  
Address: 2868 RIVER PINES WAY  
SARASOTA FL 34231

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JASON MOORE  
Address: 2868 RIVER PINES WAY  
SARASOTA FL 34231

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

10/2/2012  
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

10/2/2012  
Date

FILED  
12 OCT 19 PM 4:05  
TALLAHASSEE  
SECRETARY OF STATE