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13 MAR 27 PM 4:10  
SECRETARY OF STATE  
TALLAHASSEE, FL 323

1. Bureau MAR 28 2013

Original

## COVER LETTER

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

SUBJECT: **TNA Mobile Gaming 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: **Thomas Smith**

Name (Printed or typed)

**1280 Azora Drive**

Address

**Deltona, Florida 32725**

City, State & Zip

**(786)7155980**

Daytime Telephone number

**tnamobilegaming@gmail.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: TNA Mobile Gaming Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1280 Azora Drive  
Deltona, Florida 32725

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Business Management Services

**ARTICLE IV SHARES**

The number of shares of stock is: 7500

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

Name and Title: Thomas Smith - CEO

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

Address 1280 Azora Drive  
Deltona, Florida 32725

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

Name and Title: Jason Arroyo - CFO

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

Address 1280 Azora Drive  
Deltona, Florida 32725

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

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

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

Address \_\_\_\_\_

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

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TALLAHASSEE, FLORIDA

(cont.)

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: Thomas Smith  
Address: 1280 Azora Drive  
Deltona, Florida 32725

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Thomas Smith  
Address: 1280 Azora Drive  
Deltona, Florida 32725

*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*

Thomas Smith  
Required Signature/Registered Agent

3-22-2013  
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.*

Thomas Smith  
Required Signature/Incorporator

3-22-2013  
Date