

P 13000054487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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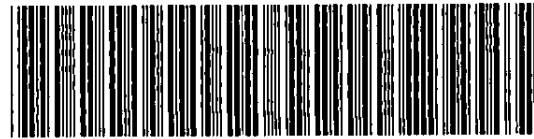
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

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

SUBJECT: TC Resources Tech, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: JOSEPH SAPORTAS

Name (Printed or typed)

17079 FIRST STREET EAST

Address

N. REDINGTON BEACH FL 33708

City, State & Zip

727.492.3799

Daytime Telephone number

JSAPORTAS@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: TC RESOURCES TECH INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address
17079 FIRST ST EAST
N REDINGTON BEACH FL
33708

Mailing address, if different is:
13799 PARK BLVD #309
SEMINOLE FL 33776

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: The purpose of this organization is to:
Provide Telecommunications Services Domestically and Internationally-
Wired and Wireless/Wi-Fi.
Provide Network Consulting Services
Provide Project Management Services.
Provide Other Technology Services as Required.

ARTICLE IV SHARES
The number of shares of stock is: 50,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joseph Saportas CEO
Address: 17079 First St. East
N. Redington Beach, FL
33708

Name and Title: Sidney Daniels, Board
Address: 12002 Saw Mill Ct.
Silver Springs MD
20902

Name and Title: Arthur C Powers. Secty
Address: 7551 Yellow Fin Drive 106
Jacksonville, FL 32256

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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SECRET
FALL HAVEN, FLORIDA

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(conti.)

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:

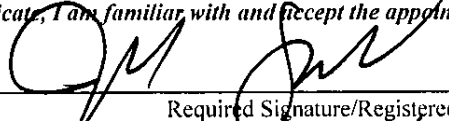
Name: Joseph Saportas
Address: 17079 First Street E
N. Redington Beach FL 33708

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joseph Saportas
Address: 17079 First Street E
N. redington Beach, FL 33708

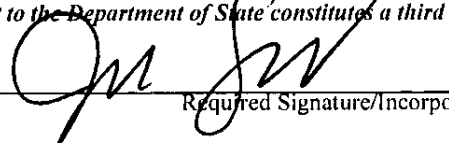
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

June 20, 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.



Required Signature/Incorporator

June 20, 2013

Date
DEPT. OF STATE
TALLAHASSEE
FLORIDA

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