P/300087327

(Re	questor's Name)		
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PICK-UP	WAIT	MAIL	
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Certified Copies	_ Certificates	of Status	
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COVER LETTER

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

SUBJECT: Tampa Web Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

370.00

\$78.75

Filing Ree

Filing Fee

& Certificate of Status

□ \$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Sunil Mathew Thomas

Name (Printed or typed)

1561 Powder Ridge Ct.

Address

Palm Harbor, Florida 34683

City, State & Zip

214-287-6317

Daytime Telephone number

mathew.thomas@longdivision.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 NAM The name of the corporat	ion shall be: Tampa Web Inc.	4
ARTICLE II PRII	VCIPAL OFFICE Principal <u>street</u> address	Mailing address, if different is:
Palm Harbor,	Florida 34683	
ARTICLE III PURI The purpose for which the professional se		and commerce in areas of technology and
	RES stock is: 1000000 TAL OFFICERS AND/OR DIRECTOR Sunil Mathew Thomas - Director	S Name and Title:
Address	1561 Powder Ridge Ct.	Address:
	Palm Harbor, Florida	
	34683	
Name and Title:		Name and Title:
Address		Address:
Name and Title:		Name and Title:
Address		

Name and	Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The name and Flo	rida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Sunil Mathew Thomas	
Address:	1561 Powder Ridge Ct.	
	Palm Harbor, Florida 34683	
	INCORPORATOR Iress of the Incorporator is:	
Name:	Sunil Mathew Thomas	
Address:	1561 Powder Ridge Ct.	
	Palm Harbor, Florida 34683	
	ed as registered agent to accept service of process in familiar with and accept the appointment as region and Mallam	for the above stated corporation at the place designated in stered agent and agree to act in this capacity 10/22/2013
	Required Signature/Registered Agent	Date
	ment and affirm that the facts stated herein are t epartment of State constitutes a thirm degree felony	rue. I am aware that the false information submitted in a as provided for in s.817.155, F.S.
_ Su	mil Masha Rome Required Signature/Incorporator	10/22/2013
	required Signature/mediporator	Date