

P/300096212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

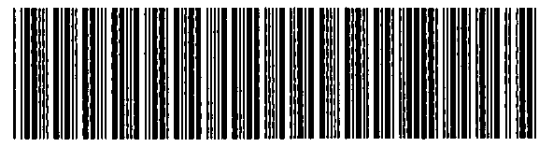
(Business Entity Name)

(Document Number)

Certified Copies   ✓      Certificates of Status   ✓  

Special Instructions to Filing Officer:

Office Use Only



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11/12/13--01029--025 \*\*78.75

SECRETARY OF STATE  
DEPARTMENT OF REVENUE  
13 NOV 25 PM 12:41

P/3-62971

*[Handwritten Signature]*  
12-2-13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 14, 2013

THOMAS HARRIS JR. INC.  
9387 WINDLAKE DRIVE  
FT. MYERS, FL 33967

SUBJECT: TOMMY HARRIS JR. INC.  
Ref. Number: W1300006297.1

RECEIVED  
13 NOV 25 AM 10:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for TOMMY HARRIS JR. 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 213A00026352

**COVER LETTER**

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

SUBJECT: New Filing for A. Profit 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Thomas Harris Jr. Inc.  
Name (Printed or typed)

9387 Windlake Dr.  
Address

Fort Myers, FL 33969-  
City, State & Zip

1-845-313-3456  
Daytime Telephone number

Tommy H385@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

November 14, 2013

THOMAS HARRIS JR. INC.  
9387 WINDLAKE DRIVE  
FT. MYERS, FL 33967

SUBJECT: TOMMY HARRIS JR. INC.  
Ref. Number: W13000062971

We have received your document for TOMMY HARRIS JR. 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 213A00026352

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 NOV 25 PM 12:41

**ARTICLE I NAME**

The name of the corporation shall be: Tommy Harris Jr. Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

9387 Windlake Dr.  
Fort Myers, Fl. 33967

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To Sell my books.  
(Through The Eyes of an Ironworker)

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Tommy Harris Jr. Name and Title: \_\_\_\_\_

Address: 9387 Windlake Dr. Address: \_\_\_\_\_  
Fort Myers, Fl. \_\_\_\_\_  
33967 \_\_\_\_\_

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

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

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: Tommy Harris Jr.  
Address: 9387 Windlake Dr.  
Fort Myers, FL 33967

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Tommy Harris Jr.  
Address: 9387 Windlake Dr.  
Fort Myers, FL 33967

*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*

X Tommy Harris Jr.  
Required Signature/Registered Agent

November 9<sup>th</sup>, 201  
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.*

X Tommy Harris Jr.  
Required Signature/Incorporator

November 9<sup>th</sup>, 201  
Date