

P/4000069177

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

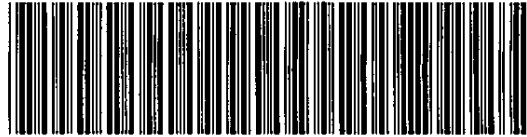
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200262952102

08/14/14--01008--008 \*\*70.00

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14 AUG 14 AM 11:28  
OFFICE OF THE CLERK  
HARRIS COUNTY, TEXAS

*K* 08/19/14

## COVER LETTER

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

SUBJECT: Team Morgan Investments, 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

<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: Tony Morgan  
Name (Printed or typed)

2 Portofino Drive Apt 607  
Address

Pensacola Beach, FL 32561  
City, State & Zip

601-520-3984  
Daytime Telephone number

\_\_\_\_\_  
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: Team Morgan Investments, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2 Portofino Drive Apt 607  
Pensacola Beach, FL 32561

Mailing address, if different is:

29433 Southfield Rd. #103  
Southfield, MI 48076

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Investment Advisor

**ARTICLE IV SHARES**

The number of shares of stock is: 60,000

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

Name and Title: Tony Morgan Pres

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

Address 2 Portofino Dr. Apt 607

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

Pensacola Beach, FL 32561

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

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

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

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

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CLERK OF THE  
COURT  
HALL COUNTY, FLORIDA

(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: Tony Morgan  
Address: 2 Portofino Dr. Apt 607  
Pensacola Beach, FL 32561


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TOLAN STATE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

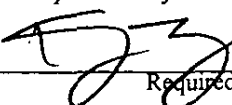
Name: Tony Morgan  
Address: 2 Portofino Dr. Apt 607  
Pensacola Beach, FL 32561

*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   
Required Signature/Registered Agent

x 8-8-14  
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   
Required Signature/Incorporator

x 8-8-14  
Date