

P/40000 9/484

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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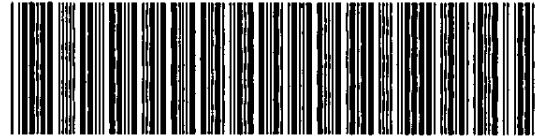
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

NOV 10 2014

S. GILBERT

COVER LETTER

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

SUBJECT: **TTMP Group 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
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: **Trevor Hadley**

Name (Printed or typed)

1406 Kilgore Lane

Address

Lake Worth FL 33460

City, State & Zip

561-602-9030

Daytime Telephone number

consw@msn.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: TTMP Group Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1406 Kilgore Lane, Lake Worth Fl 33460

14 NOV -6 PM 1:09

Mailing address, if different is:

3011 W. PALM BLVD.
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Sales Organization

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marilyn Hadley, President

Address: 1406 Kilgore Lane
Lake Worth Fl 33460

Name and Title: Paula Davis, Vice President

Address: 2071 Reston Cir
Royal Palm Beach Fl 33411

Name and Title: Tom Davis, COE

Address: 2071 Reston Cir
Royal Palm Beach Fl 33411

Name and Title: Trevor Hadley, SEC/TRES.

Address: 1406 Kilgore Lane
Lake Worth Fl 33460

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(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: Trevor Hadley

Address: 1406 Kilgore Lane

Lake Worth Fl 33460

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Trevor Hadley

Address: 1406 Kilgore Lane

Lake Worth Fl 33460

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

Trevor Hadley
Required Signature/Registered Agent

11-1-2014
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.

Trevor Hadley
Required Signature/Incorporator

11-1-2014
Date