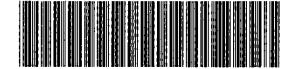
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(Address)					
(Address)					
(City/State/Zip/Phone #)					
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(Business Entity Name)					
(Document Number)					
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MAR 2 6 2015 S. GILBERT

## **COVER LETTER**

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

SUBJECT: TIM	OTHY WASHIN	<b>GTON CORP</b>	
50B0EC1	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED
FROM:	IMOTHY WASH	INGTON	
I KOM	Nam	e (Printed or typed)	
14	1010 MADISON	ST.	
		Address	<del></del>
M	IAMI, FL 33176		
	City	, State & Zip	<del>.</del>
30	05-301-0561		

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

TIMOTHY WASHINGTON CORP.  TO BECOME AN INDEPENDENT CONTRACTOR  TO BECOME AN INDEPENDENT CONTRACTOR  TO BECOME AN INDEPENDENT CONTRACTOR  TIMOTHY WASHINGTON, OWNER  Name and Title:  Address  Address:	· I	In compliance with Chapter 607 and		tra [ ] pro-	San.
ICLE IV SHARES Unpose for which the corporation is organized is:    To be compared to be corporated in the corporation of the c	ICL3.I NAM	E TIMOTHY WAS	HINGTO	V CORP.	)
AMI. FL 33176  ICLE IV SHARES Purpose for which the corporation is organized is: TO BECOME AN INDEPENDENT CONTRACTOR SHARES 100  ICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title:	ICLE II PRII	VCIPAL OFFICE Principal street address		15 MAD 21	
ICLE IV SHARES umber of shares of stock is: 100  ICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: TIMOTHY WASHINGTON, OWNER Name and Title: Address  MIAMI, FL 33176  Name and Title: Name and Title: Address: Address: Address: Address: Address: Address: Address: Name and Title:					RIDA
Name and Title:   TIMOTHY WASHINGTON, OWNER   Name and Title:	ICLE III PURI	POSE ne corporation is organized is:	OME AN INDEF	PENDENT CONTRAC	СТОГ
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Name and Title:  Name and Title:  Address  Name and Title:  Address  Name and Title:					
Name and Title:   TIMOTHY WASHINGTON, OWNER   Name and Title:	<u> </u>				
Name and Title:  Address  TIMOTHY WASHINGTON, OWNER Address:  Name and Title:  Name and Title:  Name and Title:  Address:  Name and Title:	ICI F IV SHA	PFS 400			
Name and Title:  Address  TIMOTHY WASHINGTON, OWNER Address:  Name and Title:  Name and Title:  Name and Title:  Address:  Name and Title:	ICLE IV SHA	RES 100			
Address       14010 MADISON ST.       Address:         MIAMI, FL 33176       Name and Title:       Name and Title:         Address       Address:         Name and Title:       Name and Title:					
Name and Title:  Address  Name and Title:  Address:  Name and Title:  Name and Title:	ICLE V INIT	IAL OFFICERS AND/OR DIRECTOR	<del>-</del>		
Name and Title:  Address  Address:  Name and Title:  Name and Title:  Name and Title:	ICLE V INIT	TAL OFFICERS AND/OR DIRECTOR TIMOTHY WASHINGTON, OWNER	Name and Title:_		
Address:  Name and Title:  Name and Title:	ICLE V INIT	TAL OFFICERS AND/OR DIRECTOR TIMOTHY WASHINGTON, OWNER 14010 MADISON ST.	Name and Title:_		
Address:  Name and Title:  Name and Title:	ICLE V INIT	TAL OFFICERS AND/OR DIRECTOR TIMOTHY WASHINGTON, OWNER 14010 MADISON ST.	Name and Title:_		
Name and Title:	ICLE V INIT	TAL OFFICERS AND/OR DIRECTOR TIMOTHY WASHINGTON, OWNER 14010 MADISON ST.	Name and Title:_		
Name and Title: Name and Title:	Name and Title: Address	TAL OFFICERS AND/OR DIRECTOR TIMOTHY WASHINGTON, OWNER 14010 MADISON ST. MIAMI, FL 33176	Name and Title:_ Address:		
Name and Title: Name and Title:	Name and Title: Address  Name and Title:	TAL OFFICERS AND/OR DIRECTOR TIMOTHY WASHINGTON, OWNER 14010 MADISON ST. MIAMI, FL 33176	Name and Title:_ Address: Name and Title:_		
Name and Title: Name and Title:	Name and Title: Address  Name and Title:	TIMOTHY WASHINGTON, OWNER  14010 MADISON ST.  MIAMI, FL 33176	Name and Title:_ Address: Name and Title:_ Address:		
	Name and Title: Address  Name and Title:	TAL OFFICERS AND/OR DIRECTOR TIMOTHY WASHINGTON, OWNER 14010 MADISON ST. MIAMI, FL 33176	Name and Title:_ Address: Name and Title:_ Address:		
Address: Address:	Name and Title: Address  Name and Title: Address	TIMOTHY WASHINGTON, OWNER  14010 MADISON ST.  MIAMI, FL 33176	Name and Title: Address:  Name and Title:  Name and Title:  Address:		
	Name and Title: Address  Name and Title: Address	TIMOTHY WASHINGTON, OWNER  14010 MADISON ST.  MIAMI, FL 33176	Name and Title: Address:  Name and Title:  Name and Title:  Address:		

Name and Title:		Name and Title:	
Addre		Address:	
ARTICLE VI	<b>REGISTERED AGENT</b> Florida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
	TIMOTHY WASHINGTON	The registered agent is.	
Name: Address:	14010 MADISON ST.	-	
	MIAMI, FL 33176	-	
ARTICLE VI	INCORPORATOR		
The <u>name and</u>	address of the Incorporator is:		
Name:	TIMOTHY WASHINGTON	_	
Address:	14010 MADISON ST.	-	
	MIAMI, FL 33176	-	
	amed as registered agent to accept service of process I am familiar with and accept the appointment as reg	for the above stated corporation at the place designated in ristered agent and agree to act in this capacity	
lin	med Wille	3/12/15	
	Required Signature/Registered Agent	Date	
I submit this de document to the	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.	
Jun	A later	3/12/15	
	Required Signature/Incorporator	Date	