

P/5000040076

(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



100272175521

04/29/15--01011--012 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 APR 29 AM 11:50

K 05/05/15

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:

TCF, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

STEVE WALSH

P.O. BOX 320405

302 E TAMPA CIRCLE

TAMPA, FL 33629

TAMPA, FL 33629

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 APR 29 AM 11:50

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEVE WALSH

Name and Title: _____

Address

P.O. Box 320405

Address: _____

TAMPA FL 33629

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: PATRICIA GUNN, CPA
 Address: 2980 HAINES BAYSHORE RD #110
CLEARWATER, FL 33760

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATION
 15 APR 29 AM 11:50

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: STEVE WALSH
 Address: P.O. BOX 320405
TAMPA, FL 33629

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

Patricia Gunn

Required Signature/Registered Agent

3/18/15

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.

✓ Steve Walsh

Required Signature/Incorporator

4/18/15

Date