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

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

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

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

☐ PICK-UP    ☐ WAIT    ☐ MAIL

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

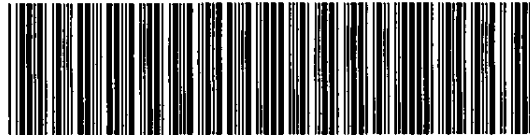
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16 MAR - 7 AM 7:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

11/11

## COVER LETTER

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

SUBJECT: Tommy Knocker Beach Bar, 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

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

FROM: Andrew Tomich  
Name (Printed or typed)  
975 Lincoln St #4D  
Address  
Denver, CO 80203  
City, State & Zip  
720 353 8108  
Daytime Telephone number  
donnatomich@aol.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)

APPROVED  
AND  
FILED

**ARTICLE I NAME**

The name of the corporation shall be: Tommy Knocker Beach Bar, Inc.

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**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal street address

Mailing address, if different is:

2641 Mall Dr.  
Sarasota, FL 34231

975 Lincoln St #4D  
Denver, CO 80203

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To acquire an existing bar

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Andrew Tomich, CEO Name and Title: \_\_\_\_\_

Address: 2641 Mall Dr. Address: \_\_\_\_\_  
Sarasota, FL 34231

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: Andrew Tomich  
Address: 2641 Mall Dr.  
Sarasota, FL 34231

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TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Andrew Tomich  
Address: 2641 Mall Dr.  
Sarasota, FL 34231

\*\*\*\*\*

*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*

Andrew Tomich 3/2/2016  
Required Signature/Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any 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.*

Andrew Tomich 3/2/2016  
Required Signature/Incorporator Date