

P16000036952

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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DEPARTMENT OF STATE
FALL ANNUAL REPORT, F1 000000

16 APR 11 AM 9:44

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 15, 2016

NATASHA KEEGAN
611 SOUTH AVE
ROCKFORD, IL 61109

SUBJECT: TNT FLOORING CORP
Ref. Number: W16000028069

We have received your document for TNT FLOORING CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation.

One or more major words may be added to make the name distinguishable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Gina McLeod
Regulatory Specialist II Supervisor

Letter Number: 316A00007824

AHN: GING

COVER LETTER

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

SUBJECT: Keegans Flooring Corp
(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: Natasha Keegan
Name (Printed or typed)

611 South Ave
Address

Rockford IL 61109
City, State & Zip

779-348-1276
Daytime Telephone number

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

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

SEAL OF THE STATE
TALLAHASSEE, FLORIDA

16 APR 26 PM 2:53

RECEIVED

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: Keegans Flooring Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

3030 N Rocky Point DR
STE 150 A Tampa FL
33607

Mailing address, if different is:

611 South Ave
Rockford IL 61109

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To subcontract through a
Flooring Store

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Natasha Keegan Owner Name and Title: _____

Address 611 South Ave Address: _____
Rockford IL 61109

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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16 APR 18 AM 9:14
CLERK OF DISTRICT COURT
ROCKFORD, ILLINOIS

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: REGISTERED AGENTS INC.
Address: 3030 N. Rocky Point Dr., STE 150A
Tampa, FL 33607

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Natasha Keegan
Address: 611 South Ave
Rockford IL 61109

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Bill Havre Bill Havre/Assistant Secretary/Registered Agents Inc.
Required Signature/Registered Agent

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.

Natasha Keegan
Required Signature/Incorporator

4-26-16
Date