

P16000067369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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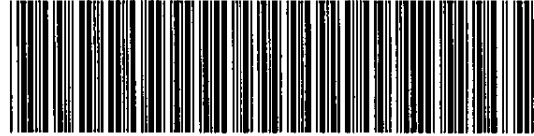
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2016 AUG - 8 AM 7:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** TCS Electrical Co.

(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:** Thomas Alexander

Name (Printed or typed)

33 Driftwood Ave SW

Address

Fort Walton Beach, FL 32548

City, State & Zip

850-543-3385

Daytime Telephone number

talAlexander@h-gcc.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)

**FILED**

**2016 AUG -8 AM 7: 52**

**ARTICLE I NAME**

The name of the corporation shall be: TCS Electrical Co.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

142 Eglin Pkwy SE

Fort Walton Beach, FL 32548

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

Mailing address, if different is:

33 Driftwood Ave. SW

Fort Walton Beach, FL 32548

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to provide electrical construction services for specialized electrical systems. Field installation services, testing and maintenance services and engineering field services for commercial, industrial and government power systems.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Thomas Alexander, President

Name and Title: \_\_\_\_\_

Address 33 Driftwood Ave. SW

Address: \_\_\_\_\_

Fort Walton Beach, FL 32548

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
2016 AUG -8 AM 7:52  
Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
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**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Thomas Alexander  
Address: 33 Driftwood Ave SW  
Fort Walton Beach, FL 32548

**ARTICLE VII INCORPORATOR**

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

Name: Thomas Alexander  
Address: 33 Driftwood Ave SW  
Fort Walton Beach, FL 32548

**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:*

\_\_\_\_\_  
Required Signature/Registered Agent  
8/4/2016  
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.*

\_\_\_\_\_  
Required Signature/Incorporator  
8/4/2016  
Date