



COVER LETTER



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

SUBJECT: Twenty Twenty Placement, 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
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: Anne Marie Blackman
Name (Printed or typed)

2067 Diamond Court
Address

Oldsmar, FL 34677
City, State & Zip

802-558-2547
Daytime Telephone number

amblackman23@gmail.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)

ARTICLE I NAME Twenty Twenty Placement, Inc.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address	Mailing address, if different is:
2067 Diamond Court	_____
Oldsmar, FL 34677	_____
_____	_____
_____	_____

ARTICLE III PURPOSE Any and all lawful business
The purpose for which the corporation is organized is: _____

FILED
17 JUN 12 AM 11:16
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anne Marie Blackman, President	Name and Title: James Blackman, VP, Sec. Treasurer
Address: 2067 Diamond Court	Address: 2067 Diamond Court
Oldsmar, FL 34677	Oldsmar, FL 34677
_____	_____

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: Anne Marie Blackman
 Address: 2067 Diamond Court
 Oldsmar, Fl. 34677

FILED
 17 JAN 12 AM 11:14
 SECRETARY OF STATE
 PALM BEACH COUNTY, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Anne Marie Blackman
 Address: 2067 Diamond Court
 Oldsmar, Fl. 34677

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 days prior or 90 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

Anne Marie Blackman _____ 1/10/17
 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.

Anne Marie Blackman _____ 1/10/17
 Required Signature/Incorporator Date
 Anne Marie Blackman