

P18000098709

(Requestor's Name)

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(Address)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

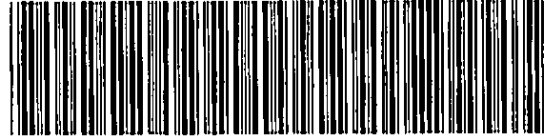
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COVER LETTER

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

SUBJECT: Central Florida TMT RE 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: Tonya Tibbetts
Name (Printed or typed)

21839 Prince William Court
Address

Leesburg FL 34748
City, State & Zip

207 . 595. 1414
Daytime Telephone number

tonya @ florida plus realty . 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

The name of the corporation shall be:

Central Florida TMT RE Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

21839 Prince William Ct
Leesburg FL 34748

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

proper federal filing, employ,
expenses for doing business, quarterly payments, etc.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Tonya Tibbitts President

Address

21839 Prince William Ct

Leesburg, FL
34748

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:

Tonya Tibbets

Address:

21839 Prince William Ct
Leesburg Fl 34748

ARTICLE VII INCORPORATOR

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

Name:

Tonya Tibbets

Address:

21839 Prince William Ct
Leesburg Fl 34748

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

[Signature]

Required Signature/Registered Agent

11-27-18

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.

[Signature]

Required Signature/Incorporator

11-27-18

Date

11-27-18 2:14 PM