

P19000057902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

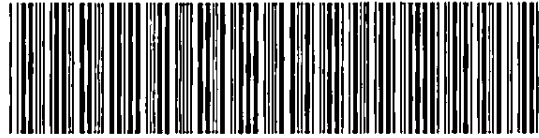
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19-67643

Office Use Only



700330236187

FILED
19 JUL 23 PM 3:40
SECRETARY
TALLAHASSEE, FL

M. MOON
JUL 26 2019

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 7/23/19

NAME: TBM HOLDINGS INC

TYPE OF FILING: ARTICLES

COST: 78.75

RETURN: PLAIN COPY AND GOOD STANDING PLEASE

FILED
19 JUL 23 PM 3:40
SECRETARY
TALLAHASSEE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

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

SUBJECT: TBM Holdings, 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: _____
Name (Printed or typed)

Address

City, State & Zip

Daytime Telephone number

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

FILED
19 JUL 23 PM 3:40
SECRETARIAT OF STATE
TALLAHASSEE, FLORIDA

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: TBM Holdings, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7380 West Sand Lake Road

Suite #360

Orlando, FL 32819

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to transact any or all lawful business for which corporations may be incorporated under the Florida Business Corporation Act as it now exists or may hereafter be amended or supplemented.

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Peter Strack, Director

Name and Title: Peter Bertenshaw, Director

Address: 39 Pine Street

Address: 452 E. Silverado Ranch Blvd. #514

Windermere, FL 34786

Las Vegas, NV 89183

Name and Title: Peter Strack, President and Secretary

Name and Title: Peter Bertenshaw, CEO and Treasurer

Address: 39 Pine Street

Address: 452 E. Silverado Ranch Blvd. #514

Windermere, FL 34786

Las Vegas, NV 89183

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: Paracorp Incorporated
Address: 155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

FILED
19 JUL 23 PM 3:40
SECRETARY
TALLAHASSEE

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jason Weber, Paralegal
Address: Snell & Wilmer, L.L.P.
One Arizona Center, Phoenix, AZ 85004

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

See attached

Required Signature/Registered Agent

07/22/2019

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

7/22/2019

Date

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 07/22/2019

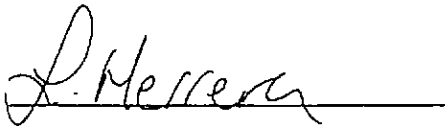
ENTITY NAME: TBM Holdings, Inc.

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

FILED
19 JUL 23 PM 3:40
SECRETARY
TALLAHASSEE

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.



Leticia Herrera, Assistant Secretary
Paracorp Incorporated