

P200008022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

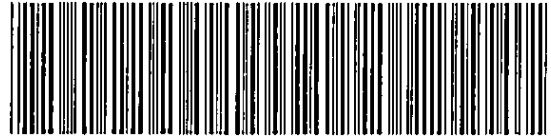
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W200008022

Office Use Only
M. MOON
JAN 31 2020



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20 JAN 28 4:33 PM

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2020 JAN 28 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2020

INCORPORATING SERVICES LTD

SUBJECT: TM HOLDINGS MANAGEMENT INC.
Ref. Number: W20000008794

We have received your document for TM HOLDINGS MANAGEMENT INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Matthew T Moon
Regulatory Specialist II Supervisor

Letter Number: 820A00002100

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TALLAHASSEE, FLORIDA

20 JAN 30 4:51

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 1/28/2020

PRIORITY Routine

OUR REF. # (Order ID#) 804071

ORDER ENTITY
TM HOLDINGS MANAGEMENT INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

TM HOLDINGS MANAGEMENT INC. (FL)

New corp filing

NOTES:

\$70.00 Authorized Please honor the original submission date as the file date.
Email address for annual report reminders: jim@geraldweinbergpc.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



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TALLAHASSEE, FLORIDA

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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: TM HOLDINGS MANAGEMENT INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1717 Avenue N
Apt. 1J
Brooklyn, New York 11230

Mailing address, if different is:
1717 Avenue N
Apt. 1J
Brooklyn, New York 11230

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tatyana Marynova, DIR. Name and Title: _____

Address 1717 Avenue N, Apt. 1J Address: _____
Brooklyn, New York 11230

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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TALLAHASSEE, FLORIDA

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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: Incorporating Services, Ltd.

Address: 1540 Glenway Drive

Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lawrence A. Kirsch

Address: 90 State Street, Suite 815

Albany, NY 12207

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

Melissa [Signature]

Required Signature/Registered Agent

1/28/2020
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.

Lawrence A. Kirsch

Required Signature/Incorporator

1/28/2020
Date

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TALLAHASSEE, FLORIDA