

P22 0000001603

(Requestor's Name)

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(City/State/Zip/Phone #)

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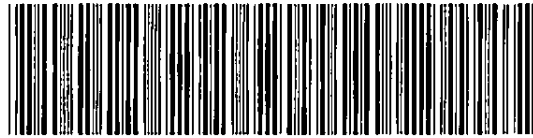
(Business Entity Name)

(Document Number)

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2022 JAN 10 AM 11:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2022 JAN 10 PM 1:30

SECRETARY OF STATE
TALLAHASSEE, FL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 368144 7492237

AUTHORIZATION :

COST LIMIT : \$ 700.00

ORDER DATE : January 10, 2022

ORDER TIME : 10:23 AM

ORDER NO. : 368144-015

CUSTOMER NO: 7492237

DOMESTIC FILING

NAME: TCFX-NH, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT.

EXAMINER'S INITIALS: _____

COVER LETTER

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

SUBJECT: TCFX-NH, 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 ☐ \$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: Norton Herrick

Name (Printed or typed)

2295 Corporate Blvd., NW, Suite 222

Address

Boca Raton, FL 33431

City, State & Zip

561/241-9880

Daytime Telephone number

nh@herrickco.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)

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ARTICLE I NAME TCFX-NH, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

SECRETARY OF STATE
TALLAHASSEE, FL
Mailing address, if different is:

2295 Corporate Blvd., NW, Suite 222

Boca Raton, FL 33431

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: All legal purposes under Florida law

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Norton Herrick, President

Address: 2295 Corporate Blvd., NW, Suite 222
Boca Raton, FL 33431

Name and Title: Michael Herrick, VP, Secretary

Address: 2295 Corporate Blvd., NW, Suite 22.
Boca Raton, FL 33431

Name and Title: Elayne Herrick, Executive VP

Address: 2295 Corporate Blvd., NW, Suite 222
Boca Raton, FL 33431

Name and Title: Howard Herrick, Exec VP

Address: 2295 Corporate Blvd., NW, Suite 22.
Boca Raton, FL 33431

Name and Title: Evan Herrick Exec VP, Treasurer

Address: 2295 Corporate Blvd., NW, Suite 222
Boca Raton, FL 33431

Name and Title:

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: Corporation Service Company

Address: 1201 Hays Street

Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

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

Name: Douglas C. Peter

Address: 11910 Greenville Ave., Suite 400

Dallas, TX 75243

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SECRETARY OF STATE
TALLAHASSEE, FL

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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

Alexis Weibel, assistant vice president
Required Signature/Registered Agent

1/10/2022
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

January 7, 2022
Date