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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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CORPORATE ACCESS, INC.

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236 East 6th Avenue. Tallahassee, Florida 32303
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	CERTIFIED COPY	
XX	**PHOTOCOPY**	
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XX	**FILING**	**INC**

1. **TITCHFIELD HOLDINGS INC.**
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: _____

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: Titchfield Holdings Inc.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address	Mailing address, if different is:
513 NW Lincoln Avenue Port St. Lucie, FL 34983	SAME

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Fitness Studio

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ARTICLE IV SHARES
The number of shares of stock is: 10,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Donnovan F. Williams	Name and Title:	President/Secretary/Treasurer/Director
Address	513 NW Lincoln Avenue Port St. Lucie, FL 34983	Address:	
Name and Title:	Shelly A. Williams	Name and Title:	Vice President/Director
Address	513 NW Lincoln Avenue Port St. Lucie, FL 34983	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: Donnovan F. Williams

Address: 513 NW Lincoln Avenue
Port St. Lucie, FL 34983

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ARTICLE VII INCORPORATOR

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

Name: Donnovan F. Williams

Address: 513 NW Lincoln Avenue
Port St. Lucie, FL 34983

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

_____ 12/7/2022

Required Signature/Registered Agent Donnovan F. Williams 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.

_____ 12/7/2022

Required Signature/Incorporator Donnovan F. Williams Date