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**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**

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**DATE:** 09/07/2023

**NAME:** TOUCHSTONE CAPITAL VENTURES, INC.

**TYPE OF FILING:** ARTICLES

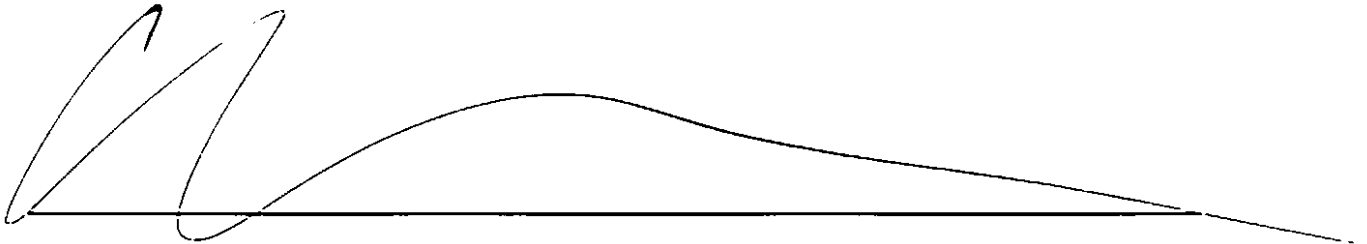
**COST:** 70.00

**RETURN:** PLAIN COPY PLEASE

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**ACCOUNT:** FCA000000015

**AUTHORIZATION:** ABBIE/PAUL HODGE

A large, stylized handwritten signature in black ink, appearing to read 'Abbie/PAUL HODGE', written over a horizontal line.A handwritten signature in black ink that reads 'File KFA'.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 8, 2023

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: TOUCHSTONE CAPITAL VENTURES, INC.  
Ref. Number: W23000121764

We have received your document for TOUCHSTONE CAPITAL VENTURES, INC.. However, the document has not been filed and is being returned for the following:

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO  
Regulatory Specialist II  
New Filing Section

Letter Number: 223A00020650

2023 SEP 13 11:19:25

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2023 SEP 13 PM 2:31  
TALLAHASSEE, FLORIDA

*Please keep original filing date*  
*Thank you!*

## COVER LETTER

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

**SUBJECT:** Touchstone Capital Ventures, 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:** Julie I. Kline, Esq., Strassburger McKenna Gutnick & Gefsky  
Name (Printed or typed)

444 Liberty Avenue, Suite 2200

Address

Pittsburgh, PA 15222

City, State & Zip

412-281-5423

Daytime Telephone number

jkline@smgglaw.com

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

**NOTE:** Please provide the original and one copy of the articles.



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: Theodore S. Kerr  
Address: 1000 Brickell Avenue, Suite 715  
Miami, FL 33131

**ARTICLE VII INCORPORATOR**

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

Name: Julie I. Kline, Esq., Strassburger, McKenna Gutnick & Gefsky  
Address: 444 Liberty Avenue, Suite 2200  
Pittsburgh, PA 15222

**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*

Theodore S. Kerr

9/7/2023

5936F1E26F094F7...

Required Signature/Registered Agent

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.*

Julie I. Kline  
Required Signature/Incorporator

Date

9/7/23

2023 SE - 7 AM 10:25