

# P95000045004

## TRANSMITTAL LETTER

RECEIVED

95 JUN -8 PM 1:58

DIVISION OF CORPORATION

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

900001508943  
-06/08/95--01080--011  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: THUNDERBOLT SYSTEMS, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM:

Randall W. Smith, C.P.A.

Name (printed or typed)

1020 E. Lafayette St. #208

Address

Tallahassee, FL 32301

City, State & Zip

(904) 942-7555

Daytime Telephone number

FILED  
95 JUN 12 AM 11:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

BROWN JUN 12 1995



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

June 8, 1995

RANDALL W. SMITH CPA  
1020 E. LAFAYETTE STREET STE 208  
TALLAHASSEE, FL 32301

SUBJECT: MAXX SYSTEMS, INC.  
Ref. Number: W95000011711

We have received your document for MAXX SYSTEMS, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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 (904) 487-6878.

Terri Buckley  
Corporate Specialist

Letter Number: 695A00028307

*Will Wait*

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95 JUN 12 AM 11:17  
DIVISION OF CORPORATIONS

# ARTICLES OF INCORPORATION

OF

THUNDERBOLT SYSTEMS, INC

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*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

## ARTICLE I NAME

The name of the corporation shall be:

THUNDERBOLT SYSTEMS, INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

381 E. Sharon Street  
Quincy, FL 32351

## ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Max D. Kohnke  
381 E. Sharon Street  
Quincy, FL 32351

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Max D. Kohnke  
381 E. Sharon Street  
Quincy, FL. 32351

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

30<sup>th</sup> day of MAY, 19 95.

Max D. Kohnke  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

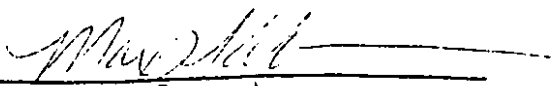
1. The name of the corporation is: THUNDERBOLT SYSTEMS, INC

2. The name and address of the registered agent and office is:

Max D. Kohnke  
(Name)  
381 E. Sharon Street  
(P.O. Box not acceptable)  
Quincy, FL 32351  
(City/State/Zip)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Signature)