

P960000025947

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 0327
Tallahassee, FL 32314

SUBJECT: TOMAS SERVICES, INC.

(proposed corporate name)

Enclosed please find an original and one (1) copy of articles of incorporation for the above corporation and check in the amount of \$70.00

600001728146
-02/29/96--01061--013
*****70.00 *****70.00

FROM:

STEVE ZABOLOTNY
c/o COMPUTeTAX, Inc.
8800 49TH ST N STE 406-5
PINELLAS PARK FL 34668
TEL: 813-545-1381

W96-4795

96 MAR 25 PM 12:15
DIVISION OF STATE
CORPORATIONS

Note: Additional copy of articles is needed only when certified copy is requested.

MAR 25 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 4, 1996

STEVEN ZABOLOTNY
8800 49TH STREET N, SUITE 406-5
PINELLAS PARK, FL 34666

SUBJECT: TOMAS SERVICES, INC.
Ref. Number: W9600004795

We have received your document for TOMAS SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(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) 487-6928.

Agnes Lunt
Corporate Specialist

Letter Number: 096A00009458

**ARTICLES OF INCORPORATION
OF**

FILED
SECRETARY OF STATE
CORPORATIONS

96 MAR 25 PM 12:16

TOMAS T. SERVICES, INC.

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: **TOMAS T. SERVICES, INC.**

ARTICLE II PRINCIPAL OFFICE

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

**2609 BRIAR OAK CIR
SARASOTA FL 34232**

ARTICLE III CAPITAL STOCK

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

100 common shares/\$ 1.00 par value.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

**STEVE ZABOLOTNY
8800 49TH STREET NORTH, SUITE 406-5
PINELLAS PARK, FLORIDA 34666**

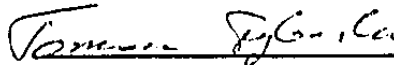
ARTICLE V INCORPORATOR(S)

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

TOMASZ TRYBURSKI
2009 BRIAR OAK CIR
SARASOTA FL 34232

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

26TH day of FEBRUARY, 1996



President

V. President

Secretary

Treasurer

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

Pursuant to the provisions of section 007.0501, 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: TOMAS T. SERVICES, INC.

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

STEVE ZABOLOTNY
8800 49TH STREET NORTH, SUITE 400-5
PINELLAS PARK, FLORIDA 34668

STATE OF FLORIDA
95 MAR 25 PM 12:16

SIGNATURE Thomas T. Boyle

TITLE President

DATE 2-26-96

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 [Signature]

DATE 2/26/96

REGISTERED AGENT FILING FEE: \$35.00