Department of State Division of Corporations P. O. Box 6327

Tallahassee, FL 32314		80	0002057 -01/14/97 ******78.75	-01103012
SUBJECT:	Tomlin Inc	rate name - must include suff	ix)	
Enclosed is an original ar	nd one(1) copy of the articl	es of incorporation and a c	check for :	
□ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	у
		ADDITIONAL CO	PY REQUIRED	
FROM:	homas L. DA	laird ed or typed)		sec DIVISI
<u></u>	75 Woodlake	Or. APT. 277	· · · · · ·	SECRETARY OF STATION SECRETARY OF CORPORATION OF CO
	keland, Fl. City, Str	<i>33803</i> ate & Zip		ORATIONS HII: 24
homas Dallaid	9401 - 644 - 6 Daytime Tele	36 7 phone number	·	
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DOC. EXAM				10 //y

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

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPLANTIONS

97 JAN 14 AMII: 24

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:

Tomlin Inc.

ARTICLE II PRINCIPAL OFFICE

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

3135 Hwy 92 E Lakeland, FL 33801

ARTICLE III SHARES

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

1

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Thomas L. D'Allaird
3135 Hwy 92 E
Lakeland, FL 33801

INCORPORATOR(S)

See instructions for officers/directors

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

Thomas L. D'Allaird 1475 Woodlake Dr. APT. 277 Laxeland, FL 33803

Linda D. D'Allaird 1475 Woodlake Dr. APT. 277 Laxeland FL 33803

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

6th day of January, 19 97.

(An additional article must be added if an effective date is requested.)

Lucia D. D'alland
Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

SECRETARY OF STATE DIVISION OF CORPORATIONS

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 Tombin Tag.

2. The name and address of the registered agent and office is:
Thomas L. DAllaird
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)
Lakeland, FL 33801
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.
Thomas L. Sallaind 1-6-97 (SIGNATURE)