

P98000005820  
TRANSMITTAL LETTER  
FILED

98 JAN 20 PM 3:10

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

400002395084--9  
-01/09/98--01030--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

**SUBJECT:** T N T PUBLISHER 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

**ADDITIONAL COPY REQUIRED**

**FROM:** Lester Turner  
Name (Printed or typed)

1147 N.W. 46 ST  
Address

Miami, Florida. 33127  
City, State & Zip

(305)-638-7976  
Daytime Telephone number

P. Hall  
JAN 20 1998

W98-776  
P. Hall  
JAN 13 1998

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



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

January 13, 1998

LESTER TURNER  
1147 NW 46 ST  
MIAMI, FL 33127

SUBJECT: T N T PUBLISHER INC.  
Ref. Number: W98000000776

We have received your document for T N T PUBLISHER INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and street address must be consistent wherever it appears in your document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return the original and one copy of 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 (850) 487-6915.

Pamela Hall  
Document Specialist

Letter Number: 498A00001809

**ARTICLES OF INCORPORATION**

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98 JAN 20 PM 3:11

*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.* TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

T N T PUBLISHER INC.

**ARTICLE II PRINCIPAL OFFICE**

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

11772 S.W. 14th ST  
Miami, Florida 33184

**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:

Lester Turner  
1147 N.W. 46 ST  
Miami, Florida. 33127

**ARTICLE V 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):

Lester Turner  
1147 N.W. 46 ST  
Miami, Fla. 33127

Larry L. Turnipseed  
7555 S.W. 153 PL #107  
Miami, Fla. 33193

Edward Waller  
12975 N.W. 17 Ave  
Miami, Fla. 33167

Lettie Michell  
1717 N.W. 56th ST  
Lauderhill Fla. 33313

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

06 day of January, 19 98

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

\_\_\_\_\_  
Signature  
*Larry L. Turnipseed*  
\_\_\_\_\_  
Signature  
*Lester Turner*  
\_\_\_\_\_  
Signature

**Notarization is not required**

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

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 T N T PUBLISHER INC

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

Lester Turner

(NAME)

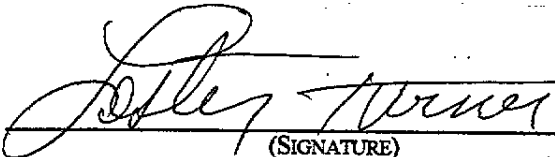
1147 N.W. 46 ST

(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Miami, Florida. 33127

(CITY/STATE/ZIP)

*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)

1-6-98  
(DATE)