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*****78.75 *****78.75 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy = Walk in Pick up time Photocopy Certificate of Status Mail out ☐ Will wait NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Merger REGISTRATION/ OTHER FILINGS **QUALIFICATION** Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark 8 1999 Other

Examiner's Initials

ARTICLES OF INCORPORATION

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:

TEL-Plus. COM, INC

ARTICLE II PRINCIPAL OFFICE

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

598 Burlwood terrace. Tarpon Springs, FL. 34689

ARTICLE III SHARES

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

100 Shares - No Par Calve

ARTICLE IV INITIAL REGISTRATED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is :

Micholas J. Braia
598 Burlwood Terrace
Tarpon Springs. FL. 34689

ARTICLE V INCORPORATOR (S)

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

Michelas J. Brain
598 Burlwood Tarrace
Tarpor Springs, FL 34689

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

31 day of March 19 99

signature

signature

signature

ARTICLES OF INCORPORATION filing fee -\$ 35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/ REGISTERED OFFICE

1. The name of the corporation is:

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES THE UNDERSIGNED CORPORTATION, 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

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2. The name and address of the registered agent and office is: Section Bration	TALLAHASSEE, TE	99 APR -5 AM 8:	ニコロコ
(P.O.Box not acceptable)		語る	

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED COPORATION 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.

(Signapare) 3-74 gg (Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327 TALLAHASSEE, FL 32314