

P99000058431

TRANSMITTAL LETTER

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

600002917546--4  
-06/28/99--01100--011  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: Top Score 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 of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee, Certified  
Copy & Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM:

Cecelia Magrath

Name (Printed or typed)

29243 S.W. 165 Avenue

Address

Homestead, Florida 33033

City, State & Zip

(305) 248-2153

Daytime Telephone Number

FILED  
99 JUN 28 AM 8:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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RJ  
6-29-99

ARTICLES OF INCORPORATION

**ARTICLE I NAME**

The name of the corporation shall be: TOP SCORE INC.

**ARTICLE II PRINCIPAL OFFICE**

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

29243 S.W. 165 Avenue  
Homestead, Florida 33033

**ARTICLE III SHARES**

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

20,000

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the initial registered agent are:

Cecelia Magrath  
29243 S.W. 165 Avenue  
Homestead, Florida 33033

**ARTICLE V INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

Cecelia Magrath  
29243 S.W. 165 Avenue  
Homestead, Florida 33033

Cecelia Magrath  
Signature/Incorporator Cecelia Magrath

6/22/99  
Date

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

*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.*

Cecelia Magrath  
Signature/Registered Agent Cecelia Magrath

6/22/99  
Date

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TALLAHASSEE, FLORIDA