

TRANSMITTAL LETTER

P99000105096

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

FILED
99 DEC -1 AM 8:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: TAF Consultants, Inc

(Proposed corporate name - must include suffix)

600003057836--7
-12/01/99--01066--001
*****70.00 *****70.00

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: Thomas Feally
Name (Printed or typed)

9764 NW 19th Street
Address

Coral Springs FL 33071
City, State & Zip

954 755 7139
Daytime Telephone number

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

B. BROWN DEC - 6 1999.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

TAF Consultants, Inc

ARTICLE II PRINCIPAL OFFICE

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

9764 NW 19th Street
Coral Springs FL 33071

ARTICLE III SHARES

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

One

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Thomas A. Feally
9764 NW 19th Street Coral Springs FL 33071

ARTICLE V INCORPORATOR

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

Thomas A. Feally
9764 NW 19th Street Coral Springs FL 33071

Thomas A. Feally

Signature/Incorporator

11/27/99

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

Thomas A. Feally

Signature/Registered Agent

11/27/99

Date