## 6000036697

(Requestor's Name)	
(Address)	20
(Address)  (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:  Manual Dieudouregave AUTHORIZATION BY PHONE TO CORRECT (MILLE) DATE 3//3/06 DOC. EXAM MILLS	mps.

Office Use Only



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## **COVER LETTER**

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

SUBJECT: XPERT TAX & MORTGAGE, INC.  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
Enclosed are an original and one (1) copy of the artic  \$70.00 \$\sum \\$78.75\$  Filing Fee \$Filing Fee & Certificate of Status	eles of incorporation and a check for:  \$78.75 \$87.50  Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED		
FROM: NANIE DIEUDONNE Name (Printed or typed)			
North Miami	State & Zip		

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

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME .	
The name of the corporation shall be:	FILED
X pert Tax & Mortgage, Inc.	06 MAR 13 PM 4:41
	SECRETARY STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	IACLAHASSEE, FLURIDA
The principal place of business/mailing address is:	ر المارية
12195 NW 7th Ave.	
North Miami, Fl 33168 ARTICLE III PURPOSE	-
The purpose for which the corporation is organized is:	
Prepare Income Tax Return	
Solicit Mortgage Loans	·
ARTICLE IV SHARES	
The number of shares of stock is:	
50	•
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	, _ f
Nanine Dreudonne, 12195 10 7th Ave,	N. Miami, Fl 33168 (Pres
Max R Joseph, 12195 NW Th Ave.	N. Mi ami, FI 33168/Vices
, ,	, 25,00 (1100
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the	registered agent is:
Nanine Dieudonne	
12595 NW 16 Ave.	
N. Mcami, F. 33/67 ARTICLE VII INCORPORATOR	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Nanine Dreudonne 12595 NW 16 Ave	
N. Miani, Fr 33167	
**************************************	*********
Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree	
	02/00/01
Signature/Registered Agent	1
U = U = U = U	<del></del>

Signature/Incorporator