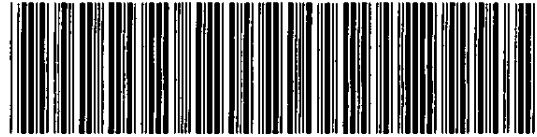


PO8000084857



100134515201

08/22/08--01008--003 \*\*70.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

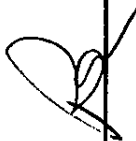
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

FILED  
08 SEP 16 PM 9:19  
SECRETARY OF STATE  
BELLINGHAM, WASHINGTON



**COVER LETTER**

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

**SUBJECT:** Alexandra Wolfe CPA PA  
**(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)**

Enclosed are 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:** Alexandra Wolfe  
Name (Printed or typed)

4421 W. Gray Street  
Address

Tampa, FL 33609  
City, State & Zip

813-389-3995  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 22, 2008

ALEXANDRA WOLFE  
4421 W GRAY STREET  
TAMPA, FL 33609

SUBJECT: ALEXANDRAWOLFE CPA PA  
Ref. Number: W08000039370

We have received your document for ALEXANDRAWOLFE CPA PA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return the corrected 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) 245-6052.

Paisley A Alford  
Clerk  
New Filing Section

Letter Number: 108A00047141

**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:

Alexandra Wolfe CPA PA

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

4421 W. GRAY ST.  
TAMPA FL 33609

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide accounting services.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Alexandra Wolfe CPA  
4421 W. Gray Street  
Tampa, FL 33609

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Alexandra Wolfe CPA  
4421 W. Gray Street  
Tampa, FL 33609

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Alexandra Wolfe CPA  
4421 W. Gray Street  
Tampa, FL 33609

\*\*\*\*\*  
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Alexandra Wolfe  
Signature/Registered Agent

8/20/08

Date

Alexandra Wolfe  
Signature/Incorporator

8/20/08

Date

FILED  
08 SEP 16 PM 9:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA