

P120000098629

(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



400242172974

11/30/12--01016--010 \*\*70.00

FILED  
12 NOV 30 PM 12: 15  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

12/3

**COVER LETTER**

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

**SUBJECT:** Tax Maztermindz Inc.  
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Alvonia Wright  
Name (Printed or typed)

1311 NE 148th Street  
Address

Miami, Fl 33161  
City, State & Zip

(786) 317-4127  
Daytime Telephone number

walvonia@yahoo.com  
E-mail address: (to be used for future annual report notification)

**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: **Tax Maztermindz Inc.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1311 NE 148th Street  
Miami, Fl 33161

Mailing address, if different is:  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The purpose of the corporation is to provide tax preparation services to the community.

**ARTICLE IV SHARES**

The number of shares of stock is: **100**

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

Name and Title: <u>Alvonia Wright/ Owner</u>	Name and Title: _____
Address: <u>1311 NE 148th Street</u>	Address: _____
<u>Miami, Fl 33161</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: Alvonia Wright  
Address: 1311 NE 148th Street  
Miami, Fl 33161

**FILED**  
**12 NOV 30 PM 12:15**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Alvonia Wright  
Address: 1311 NE 148th Street  
Miami, Fl 33161

*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*

*Alvonia Wright*  
Required Signature/Registered Agent

11/21/12  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

*Alvonia Wright*  
Required Signature/Incorporator

11/21/12  
Date