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| (Requestor's Name) | | | | |
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| (Ad | dress) | · · · · · · · · · · · · · · · · · · · | | |
| (Ad | ldress) | | | |
| (Cit | y/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nar | me) | | |
| (Do | cument Number) | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to | Filing Officer: | | | |
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SECRETARY OF STAFE DIVISION OF CORPORATIONS

'JAN 2 8 2016

S. PRATHE:

COVER LETTER

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

| SUBJECT: Richard | J. Browdy Certified Public Accoun- | tant, PA | |
|----------------------|--|------------------------------------|----------------------------|
| | (PROPOSED CORPORA | ATE NAME – MUST INCL | UDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the ar | ticles of incorporation and | d a check for: |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy | & Certificate of Status |
| | | ADDITIONAL CO | PY REQUIRED |
| FROM: | hard J. Browdy Nam | e (Printed or typed) | |
| 965 | 5 South Dixie Hwy, Suite 105 | | |
| • | | Address | |
| Mia | mi, FL 33156-2813 | | |
| | City | , State & Zip | |
| 305- | 668-4414 | | |
| | Daytime 1 | Telephone number | |
| brow | /dycpa@aol.com | | |
| | E-mail address: (to be use | d 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 II PRINCIPA | | | ccountant, PA | | |
|---|---|----------------------|-----------------------|--------------------|---|
| Pri | <u>4L OFFICE</u> ncipal <u>street</u> address | | Mailing address | , if different is: | |
| 9655 South Dixie Hwy, Sui | ite 105 | | SAME | | |
| Miami, FL 33156-2813 | | | | | |
| ARTICLE III PURPOSE The purpose for which the c | corporation is organized is: | Providing accounting | ng and tax services. | ਰ ਜ | 35 C |
| | | | | 28 | 95. 55. |
| | | | | 79 | 0.55 19.00 10.00 1 |
| | | | | ယ္ | STAT DRAT |
| | | | | 0 | 340 |
| Name and Title: Ri Address 96: | tk is: DFFICERS AND/OR DIRE chard J. Browdy- President 55 South Dixie Hwy, Suite iami, FL 33156-2813 | ECTORS | e and Title: ress: | | |
| | | Addr | ress: | | |
| | | | | | |

| Name | and Title: | Name and Title: | |
|-------------------------------------|--|--|---|
| Addre | ess | Address: | |
| | | | |
| ARTICLE VI The name and | REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) | of the registered agent is: | |
| Name: | Richard J. Browdy | | |
| Address: | 9655 South Dixie Hwy, Suite 105 | | |
| | Miami, FL 33156-2813 | | |
| ARTICLE VII | INCORPORATOR | | |
| The name and | address of the Incorporator is: | | . 9 |
| Name: | Richard J. Browdy | _ | 16 J |
| Address: | 9655 South Dixie Hwy, Suite 105 | | JAN 2 |
| | Miami, FL 33156-2813 | | 28 076 |
| | | | 임 |
| | EFFECTIVE DATE: If other than the date of filing: January 25, 2016 | . (OPTIONAL) | STATIONS SATIONS |
| | date is listed, the date must be specific and can | | ays prior or 90 business |
| | te inserted in this block does not meet the applicable effective date on the Department of State's records | | s date will not be listed as |
| Having been no this certificate, | amed as registered agent to accept service of proce I am familiar with and accept the appointment as r | ess for the above stated corporatio egistered agent and agree to act in | n at the place designated in this capacity |
| _ Kd | well to rousely | | January 25, 2016 |
| I submit this de | Required Signature/Registered Agent ocument and affirm that the facts stated herein ar | e true. I am aware that the false | Date information submitted in a |
| document to the | e Department of State constitutes althird degree feld | ony as provided for in s.817.155, F | January 25, 2016 |
| Req | uired Signature/Incorporator | | Date |
| | / | | |