# P980000 12726

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

Tampa

1 813 254 9705 Telephone Number

City

200002424732--0 -02/09/98--01030--008 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT: Michael P Massimini CPA, PA			
I enclose the original Articles of Incorporation for above corporation and a check in the amount of \$ 78		•	
(Filing Fee & Certificate)			
SIGNED:			
From:			
Michal P Massimini Name			
701 W Swann Ave Address	TALCA TALCA	98 FE	*****

33606

Michael P. MassimeryE

AUTHORIZATION BY PHONE TO

CORRECT add article III - Purpose - CPA Practice

DATE 2/9/97

DOC. EXAM 3B

State

## ARTICLES OF INCORPORATION OF Michael P Massimini CPA, PA

#### ARTICLE I NAME

The name of the corporation shall be: Michael P Massimini CPA, PA

#### ARTICLE II PRINCIPAL OFFICE

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

 701	W	Swann	n P	ve			
 Sı	ıit	e 5			 		
 Tamp	oa.	FL 3:	360	6			

#### ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: \_\_100\_\_.

#### ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Michael P. Massimini	CPA
701 W Swann Ave	
Suite 5	
Tampa FL 33606	



#### ARTICLE V INCORPORATOR

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

М	icha	ael	P M	assir	nini	
7	01 1	W St	vann	Ave		
S	uit	e 5				
T	'ampa	a F]	L 33	606		

#### ARTICLE VI PURPOSE

The purpose of the corporation is to engage in the practice of certified public accounting.

The undersigned has executed these Articles of Incorporation this day of February 1998.

, Incorporator

### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:

Michael	D	Massimini	CPA	DΖ	
MICUGET	צ	Massimini	CPA.	PA	

2. The name and address of the registered agent and office is:

Mich	ael P.	Massimin	i CPA
701	W Swan	n Ave	
Suit	e 5		
Tamp	a FL 3	3606	

Signature: (

Title:

ÍNCORPORATOR

Date: /

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.

Signature:

Date: FEB 6 1998

98 FEB -9 PH 2: 01
SECRETARY OF STATE
ARMANSSEE FLORIDA