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TRANSMITTAL LETTER

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

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-07/10/00--01110--005
*****87.50 *****87.50

SUBJECT: www.j Tax & Accounting Services Inc.
(PROPOSED CORPORATE NAME (MUST INCLUDE SUFFIX))

Enclosed is 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: Barbara J. Johnson
Name (Printed or typed)

RR 1 Box 370-25
Address

White Springs FL 32096
City, State & Zip

(904) 397-2497
Daytime Telephone number

00 JUL 10 PM 1:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

[Handwritten signature]
7-12-00
2

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:

www.j Tax & Accounting Services Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Rt. 21 Box 32
Lake City, FL 32024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Tax Preparation, Accounting + Business Services

ARTICLE IV SHARES

The number of shares of stock is:

400

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Michelle Wilson, Pres, 11530 112th St., Live Oak, FL 32060
Kathy Walkup, V. Pres, Rt 19 Box 1626 Doretha Rd, Lake City, FL 32025
Shirley Wagner, Sec, Rt 21 Box 32, Lake City, FL 32024
Barbara Johnson, Treas, RR1 Box 370-25, White Springs, FL 32096

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

Barbara J. Johnson
RR1 Box 370-25
U.S. Hwy 41
White Springs, FL 32096

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barbara J. Johnson
RR1 Box 370-25
White Springs, FL 32096

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

Barbara J. Johnson
Signature/Registered Agent Barbara J. Johnson

7-6-00
Date

Barbara J. Johnson
Signature/Incorporator Barbara J. Johnson

7-6-00
Date

FILED
JUL 10 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA