TRANSMITTAL LETTER

P01000017379

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

2000037058128 -02/15/0101070001 ******78.75 ******78.75
FICATION, INC.

Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for:
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Silvia Maria Sakker Name (Printed or typed)			
	Coconut Cre	Sroad #11 Address CK FLorida State & Zip	1 174L 30 78 F L F L F L F L F L F L F L F L F L F
-	(954) 5 Daytime Te	74-0104 elephone number	100 July 200

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

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s .e	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: Gemini Tax Verification, Inc. 01 FEB 15 PM 3: 23
	ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 5440 Lyons Road # 111 COCONUT Creek, FLorida 33073
Tax	ARTICLE III PURPOSE The purpose for which the corporation is organized is: for ProFit Verification—for Banks, mortgage co., and lending institutions
	ARTICLE IV SHARES The number of shares of stock is: 1000 500 Silvia Sakker 500 angela Sakker
	ARTICLE V INITIAL OFFICERS (DIRECTORS (optional)
	The name(s) and address(es): Silvia M. Sakker-5440 Lyons rd # 111 Coconut Creek, FL 33073
	Angela M. Sakker-153-29 79th avenue # A
	ARTICLE VI REGISTERED AGENT FLUSHING, NY 11367
	The <u>name and Florida street address</u> of the registered agent is:
	SILVIA Sakker-5440 Lyons Road # 111 COCONUT Creek, FL 33073
	ARTICLE VII INCORPORATOR
	The name and address of the Incorporator is: SILvia Sarker - 5440 Lyons Road #111
	COCONUT Creck, FLOrida 33073
	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
	Silvia M. Sakkes Eep 12,2001
	Signature/Registered Agent Si
•	Signature/Incorporator Silvia M. Sakker Date