

TRANSMITTAL LETTER

PO1060048128

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

SUBJECT: CPS BUREAU, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900004191009--3
-05/09/01--01081--006
*****87.50 *****87.50

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: AMIR M. RIVERS
Name (Printed or typed)

11705 BOYETTE RD, SUITE 217
Address

RIVERVIEW, FLORIDA 33569
City, State & Zip

(813) 299-4738 OR (813) 671-5963
Daytime Telephone number

SECRET
DIVISION OF STATE
TALLAHASSEE, FLORIDA

01 MAY 09 AM 9:31

FILED

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

T. SMITH MAY 15 2001

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:

CPS BUREAU, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**11705 BOYETTE Rd. SUITE 217
RIVERVIEW, FL 33569**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**TO PROVIDE ENGINEERING COMPUTER AIDED DRAFTING (CAD)
SERVICES TO CORPORATE, MANUFACTURING AND ARCHITECTURAL
COMPANIES.**

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES (ONE HUNDRED)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

**AMIR M. RIVERS
11705 BOYETTE Rd
#217**

RIVERVIEW, FL 33569

**ROBERT RIVERS
13014 N. DALE MABRY HWY
#519
TAMPA, FL 33618**

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

**AMIR M. RIVERS
11705 BOYETTE Rd, #217
RIVERVIEW, FL 33569**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**AMIR M. RIVERS
11705 BOYETTE Rd., #217
RIVERVIEW, FL 33569**

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

Signature Registered Agent

Date

5-7-01

Signature/Incorporator

Date

5-7-01

FILED
01 MAY -9 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA