

TRANSMITTAL LETTER

P010000 72167

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

SUBJECT: Firsttrust Advisors, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300004486283--4  
-07/19/01--01073--017  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: Tracy Sciarro  
Name (Printed or typed)  
1936 Boothe Circle  
Address  
Longwood, Fl 32750  
City, State & Zip  
(407) 788-3355  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 JUL 19 PM 2:27

FILED

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

5 4123257

JUL 23 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:

Firsttrust Advisors, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1936 Boothe Circle  
Longwood, Fl 32750

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Accounting and consulting services

## ARTICLE IV SHARES

The number of shares of stock is:

10,000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Edwin V. Kirk (D)  
1936 Boothe Cir.  
Longwood, Fl 32750

Arianne Brupbacher (D)  
P.O. Box 6279  
Longwood, Fl 32791

Tracy Sciarro (D)  
P.O. Box 162411  
Alt. Springs, Fl 32714

## ARTICLE VI REGISTERED AGENT

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

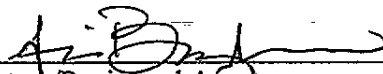
Arianne R. Brupbacher  
1936 Boothe Circle  
Longwood, Fl 32750

## ARTICLE VII INCORPORATOR

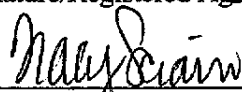
The name and address of the Incorporator is:

Tracy Sciarro  
1936 Boothe Circle  
Longwood, Fl 32750

\*\*\*\*\*  
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

5.17.01  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

5-17-01  
\_\_\_\_\_  
Date

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