

# PO1000107080

## TRANSMITTAL LETTER

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

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-11/05/01--01077--017

\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: ART BLISS FINANCIAL SERVICES INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: ARTHUR T. BLISS  
Name (Printed or typed)

2592 ELDERBERRY DR  
Address

CLEARWATER FLORIDA 33761  
City, State & Zip

727-781-9378  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

ART BLISS FINANCIAL SERVICES INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2592 ELDERBERRY DR  
CLEARWATER, FL 33761

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

FOR PROFIT CORPORATION  
INSURANCE AND FINANCIAL SERVICES

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

ARTHUR T. BLISS President  
IRAWAY BLISS VICE-PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

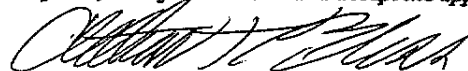
ARTHUR T. BLISS  
2592 ELDERBERRY DR  
CLEARWATER FLORIDA 33761

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

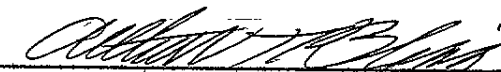
ARTHUR T. BLISS  
2592 ELDERBERRY DR  
CLEARWATER, FLORIDA 33761

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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

11-2-01  
Date



Signature/Incorporator

11-2-01  
Date