

P02000614258

TRANSMITTAL LETTER

FILED

02 FEB -4 PM 3:59

SECRET, FLA. STATE  
TALLAHASSEE, FLORIDA

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

SUBJECT: BERMUDEZ + ASSOCIATES, INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600004865116--4

-02/04/02--01092--002

\*\*\*\*\*87.50 \*\*\*\*\*87.50

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: DEBORAH BERMUDEZ  
Name (Printed or typed)

3535 NW 89 TERRACE  
Address

COOPER CITY, FL 33024  
City, State & Zip

(954) 450-6555  
Daytime Telephone number

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

CB 2-T

**ARTICLES OF INCORPORATION**

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

**FILED**

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**ARTICLE I NAME**

The name of the corporation shall be:

BERMUDEZ & ASSOCIATES, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3535 NW 89 TERRACE COOPER CITY, FL 33024

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: PROFESSIONAL CORPORATION

ACCOUNTING SERVICES

**ARTICLE IV SHARES**

The number of shares of stock is:

500

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

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

DEBORAH BERMUDEZ, PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

DEBORAH BERMUDEZ  
3535 NW 89 TERRACE  
COOPER CITY, FL 33024

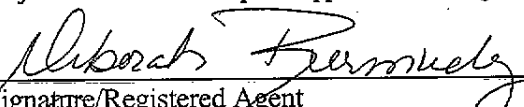
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

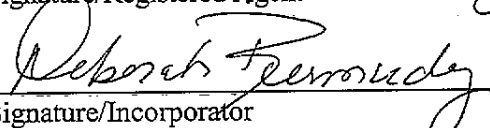
DEBORAH BERMUDEZ  
3535 NW 89 TERRACE  
COOPER CITY, FL 33024

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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

  
Date

  
Signature/Incorporator

  
Date