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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32315

0000565780--06/03/02--01080--020

SUBJECT: CPA TAX SERVICES OF S.W. FL., INC. ******70.00 ******70.00 (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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	

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

F 4/102

ARTICLES OF INCORPORATION

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

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ARTICLE I NAME
The name of the corporation shall be
CPA TAX SERVICES OF S.W. FL., INC.

SECRE TARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 2249 River Oak Lane; Fort Myers, Florida, 33905

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Engaging in the transaction of any and all business activities permitted under the laws of Florida and the United States of America.

ARTICLE IV SHARES

The number of shares of stock is: One Hunderd (100)

<u>ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)</u>

The name(s) and address(es):

Jim Haas

2249 River Oak Lane

Fort Myers, Florida, 33905

ARTICLE VI REGISTERED AGENT

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

Jim Haas

2249 River Oak Lane

Fort Myers, Florida, 33905

ARTICLE VII INCORPORATOR

The name and address fo the Incorporator is:

Jim Haas

2249 River Oak Lane

Fort Myers, Florida, 33905

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

er II House

Date

Signature/Incorporator