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TRANSMITTAL LETTER

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02 JUL 19 PM 1:59

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

SUBJECT: Sunrise Insurance & Income Tax  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Services, Inc. 300006529269--1

-07/19/02--01049--013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: Dr. Ellis J. Parker  
Name (Printed or typed)

1101 N.E. 5th Terrace, Suite 1  
Address

Fort Lauderdale, FL 33304  
City, State & Zip

954) 467 6845  
Daytime Telephone number

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

D. WHITE JUL 22 2002

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# 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:

Sunrise Insurance + Income Tax Services, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1101 N.E. 5th Terrace, Suite 1  
Fort Lauderdale, FL 33304

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Insurance and Tax Services

## ARTICLE IV SHARES

The number of shares of stock is:

100,000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Dr. Ellis J. Parker, Director  
1101 N.E. 5th Terrace, Suite 1  
Fort Lauderdale, FL 33304

## ARTICLE VI REGISTERED AGENT

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

Dr. Ellis J. Parker  
1101 N.E. 5th Terrace, Suite 1  
Fort Lauderdale, FL 33304

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. Ellis J. Parker  
1101 N.E. 5th Terrace, Suite 1  
Fort Lauderdale, FL 33304

\*\*\*\*\*  
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

Signature/Incorporator

Date

Date

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