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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SLURETARY OF STATES



TRANSMITTAL LETTER

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

| SUBJECT: | The FAX MAS (PROPOSED CORPORA) | Fex of Centre NAME - MUST INCL | fral flox.da Inc. UDE SUFFIXO | | |
|---|--|--|-------------------------------|--|--|
| | | | | | |
| Enclosed are an orig | rinal and one (1) copy of the artic | cles of incorporation and | l a check for: | | |
| | \$78.75 Filing Fee & Certificate of Status | □ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | & Certificate of Status | | |
| FROM: Alumber to U. Collazo Name (Printed or typed) | | | | | |
| 7693 Cekes OK. Address | | | | | |
| ORlando Fl. 32825 City, State & Zip | | | | | |
| 321-231-8836 Daytime Telephone number | | | | | |

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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SLCRETARY OF STATE TALL AHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

THE TAX MASTER OF CENTRAL FLORIDA, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7693 CERES DR = ORLANDO FL 32825

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TAXES AND ACCOUNTING SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

10,000 SHARES AT 1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

HUMBERTO COLLAZO 7693 CERES DR . ORLANDO FL 32825 (PRESIDENT)

ARTICLE VI REGISTERED AGENT

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

(PRESIDENT)

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HUMBERTO COLLAZO 7693 CERES DR ORLANDO FL 32825

(PRESTDENT

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

3 /18/03 Date

3/18/03

Pare