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TRANSMITTAL LETTER

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

closed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Shirley V	V; 11/5 e (Printed or typed)	
•	101 Hai	rison Ave	
	Belleain	Beach Fl , State & Zip	33786
	727 5	966061 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)

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The name of the corporation shall be:

Asset Verification of Tumpa Bay, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2840 W BAY DRIVE #342 Belleair Bluffs, Fl 33770

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is:



1000

INITIAL OFFICERS/DIRECTORS (optional)

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

REGISTERED AGENT

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

Shirley Willis 101 Harrison Ave Belleuir Beach, Fl 33786

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Shirley Willis 101 Harrison AVE Bellegir Beach, Fl 33786

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