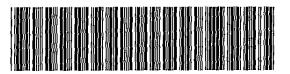
## P03000086131

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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SECRETARY OF STATE

yn 8/6

## TRANSMITTAL LETTER

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

| are an orig          | ginal and one (1) copy of the ar              | ticles of incorporation and         | d a check for:   |
|----------------------|---|-------------------------------------|--|
| 370.00<br>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 REQUIRE             |  |

ORLANDO, FL 32825

(407) ,482-4041 Daytime Telephone number

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

FILED

## ARTICLES OF INCORPORATION

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

03 AUG -4 PM 3:43

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

THE TAX MASTER OF WINTER PARK, INC

PRINCIPAL OFFICE

The principal place of business/mailing address is:

1555 SEMORAN BLVD. SUTIE 1061

WINTER PARK, FL 32792

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ACCOUNTING AND TAX SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares at \$1.00 per share

INITIAL OFFICERS/DIRECTOR (OPTIONAL)

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

ADRIAN COLLAZO (PRESIDENT)

7693 CERES DR.

ORLANDO, FL 32822

REGISTERED AGENT ARTICLE VI

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

ADRIAN COLLAZO (REGISTERED AGENT)

7693 CERES DR.

ORLANDO, FL 32822

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ADRIAN COLLAZO (INCORPORATOR)

**7693 CERES DR.** 

ORLANDO, FL 32822

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

Signature/Incorpora