## P03000107462

(Requestor's Name)	
(Address)	
(Address)	
(100.555)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified CopiesCertificates of Status	
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BURETARY OF STATE
ATTACKS FLORIDA

me wil

## TRANSMITTAL LETTER

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

Department of State

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

398-7763 Daytime Telephone number

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
	03 SEP 29 PM 3: 37
ARTICLE I NAME  The name of the corporation shall be:	SECRETARY OF STATE
. Hipps Myrick, Inc.	TALLAHASSEE, FLORIDA
•	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:	•
1121 Monticello Rd.	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
Consulting for government relative	`cuo
ARTICLE IV SHARES —	r.
The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	•
Alberta Hipos Pres.	
Alberta Hipps, Pres. Virginia Myrick, Vici Pres	
ARTICLE VI REGISTERED AGENT	
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:	Ginia Myrice
121	,
JACKSONUME AL 32207	
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:	•
Orginia D. Myriaic = 1 1121 Manticello Rel 32207	
	********
Having been named as registered agent to accept service of process for the above start certificate, I am familiar with and accept the appointment as registered agent and agree	
My Mac Signature/Registered Agent	9-24-03 Date
Signature/Incorporator	9-24-03 Date