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(R	equestor's Name))
(Ar	ddress)	<u> </u>
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(C	ity/State/Zip/Phon	ie #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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J. l 3115/05

TRANSMITTAL LETTER

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

	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
ed are an orig	ginal and one (1) copy of the art	cicles of incorporation and	a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	ZI \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Alli	ison J Volland	e (Printed or typed)	
	1708 Nursery Road	Address	
	Clearwater, FL 33756		
	Clearwater, FL 33756	Address , State & Zip	

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

ARTICLE'S OF INCORPORATION

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

FILED

05 MAR -7 PM 3:50

ARTICLE I NAME

The name of the corporation shall be:

DELIGETARY OF STATE INLEADANCE. FLORIDA

Volland Accounting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1708 Nursery Road
Clearwater, FL 33756

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Bookkeeping/Tax Preparation

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Allison J Volland President 1708 Nursery Road Clearwater, FL 33756 Stanley A Volland Vice President 1708 Nursery Road Clearwater, FL 33756

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Allison J Volland 1708 Nursery Road Clearwater, FL 33756

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Allison J Volland 1708 Nursery Road Clearwater, FL 33756

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

Date

3-2-05

Signature/Incomparator

Date