## P05000060404

(Requestor's Name)		
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(C)	ty/State/Zip/Phone	40
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PICK-UP	☐ WAIT	MAIL
(Rt)	siness Entity Nam	ne)
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Chariel Instructions to	Filing Officer	
Special Instructions to Filing Officer:		

Office Use Only



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4/26/05/2 WOS-16077

## TRANSMITTAL LETTER

Department of State Division of Corpora P. O. Box 6327 Tallahassee, FL 323	tions	Fig. 19. Sec. of Section 1. Section 1. Sec. of Section 1. Sec. of Section 1. Sec. of Section 1. Sec. of Sec. o	Transa X	e sages d <mark>i</mark> ⊶
SUBJECT:}	FELMANDEZ ACCOUNT	UTING SOLUTION TENAME-MUST INCL	YIS INC. UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	les 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Hernandez Acco	UNTING SOLU Printed or typed)	tions Inc.	
	16422 Ivy CAKE	DRIVE ddress		
	O Dessa , FL 33	556 State & Zip		
	813 - 792 - 9	132		

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



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 4, 2005

HERNANDEZ ACCOUNTING SOLUTIONS INC. 16422 IVY LAKE DR ODESSA, FL 33556

SUBJECT: HERNANDEZ ACCOUNTING SOLUTIONS INC.

Ref. Number: W05000016777

We have received your document for HERNANDEZ ACCOUNTING SOLUTIONS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6840.

Letter Number: 605A00022655

Bruce W Kitchens Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLE I NAME	05 APR 25 AM 8: 38
The name of the corporation shall be: HERNANDEZ ACCOUNTINE Solutions I	SECRETARY OF STATE TALLAHASSEE, FLORIDA
	(ALLMINGSELIT LOTTO)
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:	
16422 Ivy LAKE Drive	
00essA, FL 33556	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:  TAX & ACCOUNTING SELVICES	
THE OF THE COLUMN	
ARTICLE IV SHARES	
The number of shares of stock is: 200	
ARTICLE V INITIAL OFFICERS AND/OR DI	RECTORS
List name(s), address(es) and specific title(s):	· <u>·········</u>
MARCUS HERNANDEZ - Pres.	
Sylvia Hernandez - V.P.	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acc MARCUS HELNANDEZ	eptable) of the registered agent is:
111122 EN CAKE PRIVE	
ODESTA, FC 33556	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
2000000 1 100000000	
16422 EVY LAKE DRIVE ODESSA, FL 33556	
00es(A, FC 33536	*************
Having been named as registered agent to accept service of process j	for the above stated corporation at the place designated in this
certificate, I am familiar with and accept the appointment as registered	i agent and agree to act in this capacity
el after	4 20 05
Signature/Registered Agent	Date
Marky	3 23 05
Signature/Incorporator	Date

FILED

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