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TRANSMITTAL LETTER

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

SUBJECT: NOAMETH M. TAY OR INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
	·	<u> </u>		
Enclosed are an original and one (1) copy of the articles 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: ROAMEITH M. TAY OR Two. Name (Printed or typed)				
2820 NW 172 TEARACE Address				
	MIAMI GARDE.	NS FL 3 State & Zip	3056	
CEIL #	(305) 331-88 Daytime T	65 (305) elephone number	624-2599	

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) ARTICLE I <u>NAME</u> The name of the corporation shall be: KOAMEITH M. TAYLOR, INC. <u>ARTICLE II PRINCIPAL OFFICE</u> The principal place of business/mailing address is: 2820 NW 172 TEARACE MIAMI GARDENS FL 33056 ARTICLE III PURPOSE The purpose for which the corporation is organized is: HOME INSPECTION SERVICES 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): ROAMEITH M. TAYLOR PRESIDENT & CEO 2820 NW 172 TERRACE MIAMI GARDENS, FL REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: INCORPORATOR The name and address of the Incorporator is: MIAMI GARDENS, FL 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