

POS 000075 463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

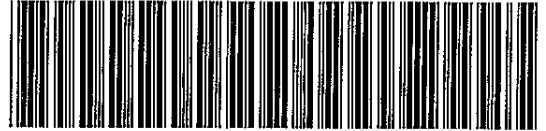
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05 MAY 23 PM 3:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

5/24/05  
BWK

## TRANSMITTAL LETTER

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

**SUBJECT:** ALL ACCOUNTING & TAXES, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** NADIA NOURI

Name (Printed or typed)

11253 LAKEVIEW DR.

Address

CORAL SPRINGS, FLORIDA 33071

City, State & Zip

(954) 873-5355

Daytime Telephone number

**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 NAME**

The name of the corporation shall be:

ALL ACCOUNTING & TAXES, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

11253 LAKEVIEW DR.  
CORAL SPRINGS, FLORIDA 33071

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO DO ACCOUNTING, BOOKEEPING AND TAX WORK

**ARTICLE IV SHARES**

The number of shares of stock is:

100 SHARES OF COMMON STOCK

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

NADIA NOURI  
11253 LAKEVIEW DR.  
CORAL SPRINGS, FL 33071  
PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

NADIA NOURI  
11253 LAKEVIEW DR.  
CORAL SPRINGS, FL 33071

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

NADIA NOURI  
11253 LAKEVIEW DR.  
CORAL SPRINGS, FL 33071

\*\*\*\*\*

*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

03/30/05  
Date

  
\_\_\_\_\_  
Signature/Incorporator

03/30/05  
Date

**FILED**

05 MAY 23 PM 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA