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,	(Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UP	WAIT _] MAIL		
·	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of State	us		
Special Instructions to Filing Officer:				
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DIVISION OF PM 4: 17

TRANSMITTAL LETTER

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

.

SUBJECT: PAFI In	c			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles 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 PPY REQUIRED	
FROM:	Owner Accounting Services Inc Name (Printed or typed)			
	43350 US	3 Highway 27 Address		
		rt Fl 33837 , State & Zip		
	863 420 Daytime	7599 Felephone 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)

05 MAY 27 PM 4: 17

ARTICLE I NAME

The name of the corporation shall be:

PAFI Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8687 W Irlo Bronson Hwy Ste 102 Kissimmee Florida

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Any and all Lawful Business

ARTICLE IV

The number of shares of stock is: 1000

INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

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

Reginald Stone

Susan Mooney

South Barn Farm

1203 Cumbrian Lakes Court

Shebbear Devon

Kissimmee FI 34746

England EX21 5SR

REGISTERED AGENT ARTICLE VI

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

Owner Accounting Services Inc. 43350 US Highway 27 Ste A10 Davenport Florida 33837

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

Stephen Harter 12530 Westfield Lakes Circle Winter Garden Florida 34787

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

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soffula on behalf of owner accounting	Servica	05/21/9		
Signature/Registered Agent	# 4 m	Date		
CAL &	<u></u>	oslalos		
Signature/Acorporator		Date		
Signature/Acorporator		OS QUOJ Date		