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TRANSMITTAL LETTER

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

SUBJECT: Access Investigative Services Inc.

Enclosed are an orig	inal and one (1) copy of the ar	ticles 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: _	Peter Cetone
	Name (Printed or typed)
	6239 Edgewater Dr. #D-13 \$ \$ PA
	Orlando, FL 32810 = 200
	407 - 447 - 6053 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:
Access Investigative Services, Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 6239 Edgewater Dr., #D-13, Orlando, FL 328/°
9
The purpose for which the corporation is organized is:
Profit
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Peter Gerone, President Melissa Gerone 6239 Edgewater Dr. # 10-13 Orlando, FL 32-870 Orlando, FL 32-870 Grando, FL 32-870
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Peter Cerone 6239 Edge water Dr. #D-13 Orlando FL 32810 ARTICLE VII INCORPORATOR
The name and address of the Incorporator is: Peter Cerone 6239 Edgelyter Dr. # D-13 DT/ands, FL 328/

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
12 Cesone 6-27-05
Signature/Registered Agent Date
Signature/Incorporator Date