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05 AUG 12 PM 4:59

TRANSMITTAL LETTER

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

JECT:	INTEGRITY BOO	1 1	
	(PROPOSED CORPORA)	ΓΕ NAME – <u>MUST INCL</u>	UDE SUFFIX)
sed are an orig	final and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM:		P. SCHMIDT	-
		(Printed or typed)	
		imben Lane	
	A	Address	
	PORT C	HARLOTTE, F	L 33953
•		State & Zip	
	(94	1) 380-4870)
	Daytime To	elephone number	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit	o THED				
in compliance with chapter out and or chapter out, 1.5. (1101.	The Case has				
ARTICLE I NAME	05 AUG 12 PM 4:59				
The name of the corporation shall be:	SURFERNA DE CTATE TO				
INTEGRITY BOOKKE	epingtallahassee. Florida				
	•				
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:					
	-				
342 CAMBEN LANE PORT CHARLOTTE, FL	33953				
ARTICLE III PURPOSE					
The purpose for which the corporation is organized is:					
PROFESSIONAL SERV	lices IN REGARD				
TO SMALL BUSIN					
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):					
SELINA P. SCHMIDT					
342 CAMDEN LANE					
PORT CHARLOTTE, FL 3	3953				
ARTICLE VI REGISTERED AGENT					
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:					
SELINA P. SCHMIDT	_				
342 CAMDEN LANE					
PORT CHARLOTTE, 1	FL 33955				
ARTICLE VII INCORPORATOR					
The <u>name and address</u> of the Incorporator is:					
SELINA P. DCHALIC) -				
SELINA P. SCHMIC 342 CAMDEN LA PORT CHARLOTTE	NE				
PORT CHARLOTTE	, FL 33953				

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					
	0/0/25				
Nelina F. XChmidt	3/8/03				
Signature/Registered Agent Date					
Selina J. Schmidt	8/8/05				
Signature/Incorporator	Date				