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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10/11/05

## TRANSMITTAL LETTER

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

SUBJECT: WILLIAM W SEARS, CPA PA  
(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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

FROM: WILLIAM W SEARS  
Name (Printed or typed)

6160 N DAVIS HWY, SUITE 7  
Address

PENSACOLA FL 32504  
City, State & Zip

850-479-1040  
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 William W. Sears, C.P.A., P.A.

**ARTICLE II**                      **PRINCIPAL OFFICE**

The principle place of business/ mailing address is:

6160 Nth Davis Hwy, Suite 7  
Pensacola, FL 32504

**ARTICLE III**                      **PURPOSE**

The purpose for which the corporation is organized in all lawful business as a Certified Public Accountant as allowed by the State of Florida.

**ARTICLE IV**                      **SHARES**

The number of shares of stock is 100.

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

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

William W. Sears, President

**ARTICLE VI**                      **REGISTERED AGENT**

The name and Florida street address of the registered agent is:

William W. Sears  
6160 Nth Davis Hwy, Suite 7  
Pensacola, FL 32504

**ARTICLE VII**                      **INCORPORATOR**


The name and address of the Incorporator is:

William W. Sears  
6160 Nth Davis Hwy, Suite 7  
Pensacola, FL 32504

*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

10/2/05  
Date

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

10/2/05  
Date

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CLERK OF STATE  
TALLAHASSEE, FLORIDA