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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Commonweal)				
Contification of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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COVER LETTER

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

SUBJECT: OJD	TAX CONSULTANT IN	С	
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
, Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:
S70.00 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
EROM. JC	HN D ORPHE		
TROM.	Name (Printed or typed)	
-	605 NW 214 STREET UNI	T 101 ddress	
	MIAMI FLA 33169		
	City, s	State & Zip	
3	3054676555		
	Daytime Te	lephone 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:

OJD TAX CONSULTANT INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4952 NW 7th AVE / MAILING ADDRESS P.O BOX 69-5172 MIAMI FL 33127 MIAMI FLA 33269

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TAX CONSULTANT & ACCOUNTANT

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):

DIANE ORPHE/ DIRECTOR JOANE ORPHE/ OFFICER 605 NW 214 STREET UNIT 101 MIAMI FLA 33169

ARTICLE VI REGISTERED AGENT

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

JOHN D ORPHE 4799 NW 7TH AVE STE C MIAMI FLA 33127

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

JOHN D ORPHE 605 NW 214 STREET UNIT 101 MIAMI FLA 33169

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

Signatur /Incorporator

05/09/2006

Date

Date

08 MAY 12 PH 3: 1