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(Requestor's Name)

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(City/State/Zip/Phone #)

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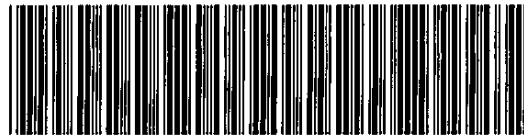
(Business Entity Name)

(Document Number)

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2006 MAY 30 AM 9:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch JUN 1 2006 •

COVER LETTER

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

SUBJECT: FULL CHARGE BOOKKEEPING, INC.
(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: GAIL E. FINCH
Name (Printed or typed)

4912 BROADSTONE CIRCLE
Address

WEST PALM BEACH, FLORIDA 33417
City, State & Zip

561-689-9696
Daytime Telephone number

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

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2006 MAY 30 AM 9:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

FULL CHARGE BOOKKEEPING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4912 BROADSTONE CIRCLE
WEST PALM BEACH, FLORIDA 33417

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BOOKKEEPING SERVICES

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):

GAIL E. FINCH, PRESIDENT
4912 BROADSTONE CIRCLE
WEST PALM BEACH, FLORIDA 33417

ARTICLE VI REGISTERED AGENT

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

GAIL E. FINCH
4912 BROADSTONE CIRCLE
WEST PALM BEACH, FLORIDA 33417

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GAIL E. FINCH
4912 BROADSTONE CIRCLE
WEST PALM BEACH, FLORIDA 33417

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

Date

Signature/Incorporator

Date