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(Re	equestor's Name)		
(Ad	ddress)		
(Ad	ddress)		
(City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL		
(Bu	usiness Entity Name)		
(Document Number)			
Certified Copies	_ Certificates of Status		
Special Instructions to	Filing Officer:		
	Office Use Only		
	16/9		
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OF JUN-9 PM 2: 41

TATEVARIASSEE, FLORIDA

COVER LETTER

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

SUBJECT: ASK Financial Services, I	NC. FE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Thomas A. Hamilton	(Printed or typed)	
3400 Hamilton Avenue	Address	
Sarasota, Florida 34242	State & Zip	
941-928-3525	elephone 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:

ASK Financial Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3400 Hamilton Avenue, Sarasota, FL 34242

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INVESTING

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):

Thomas A. Hamilton, P, VP, S, T 3400 Hamilton Avenue

Sarasota, FL 34242

ARTICLE VI REGISTERED AGENT

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

Thomas A. Hamilton 3400 Hamilton Avenue Sarasota, FL 34242

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas A. Hamilton 3400 Hamilton Avenue Sarasota, FL 34242

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

Signature/Incorporator

10/6/2006

6/6/200 W

Date

FILED

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SEURETARY OF STATE
SEURETARY OF STATE