

POL000082363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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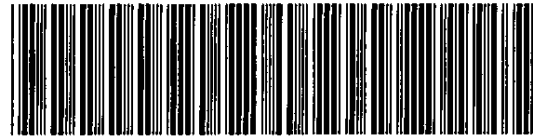
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06 JUN 15 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JUN 16 2006

W06-26294

**COVER LETTER**

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

**SUBJECT:** ASSURED SOLUTIONS, 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:** Michael W. Ullman, Esq.  
Name (Printed or typed)

150 East Palmetto Park Road, Suite 650  
Address

Boca Raton, FL 33432  
City, State & Zip

561-338-3535  
Daytime Telephone number

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**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:

~~Assured Solutions, Inc.~~ FACTOR ASSIST, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6706 Shaina Court, Lake Worth, Florida 33467

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting

## 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):

Jay Atkins, Director

## ARTICLE VI REGISTERED AGENT

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

Jay Atkins  
6706 Shaina Court, Lake Worth, Florida 33467


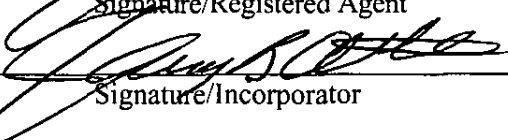
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jay Aktins  
6706 Shaina Court, Lake Worth, Florida 33467

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TALLAHASSEE, FLORIDA

\*\*\*\*\*  
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 familiyr with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

5/31/06  
\_\_\_\_\_  
Date  
5/31/06  
\_\_\_\_\_  
Date