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SEURETARY OF STATE



# TRANSMITTAL LETTER

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

SUBJECT: RISQUE OF TAMPA BAY FINANCIALS INC				
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCLA</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and	a check for:	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status	
FROM: S	ONYA CAMPBELL			
	Name (	Printed or typed)		
1326 WOODBINE ST				
Address				
CLEARWATER, FL 33755				
City, State & Zip				
	727-446-6567			
,	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:
RISQUE OF TAMPA BAY FINANCIALS INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1326 WOODBINE ST, CLEARWATER, FL 33755

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY PURPOSE THAT IS LAWFUL

#### ARTICLE IV SHARES

The number of shares of stock is: 1,000

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

List name(s), address(es) and specific title(s): PSTD: SONYA CAMPBELL 1326 WOODBINE ST CLEARWATER, FL 33755

## ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is: SONYA CAMPBELL, 1326 WOODBINE ST, CLEARWATER, FL 33755

#### ARTICLE VII INCORPORATOR

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

SONYA CAMPBELL, 1326 WOODBINE ST, CLEARWATER, FL 33755

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

<u>//31/06</u>

7/31/06

06 AUG -2 PM 1: 4 SECRETARY OF STATI TALLAHASSEE, FLORID