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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
, ,				
(Document Number)				
Certified Copies Certificates of Status				
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SECRETARY OF STATE
ALLAHASSEF, FI DATE

c.8.5-24

COVER LETTER

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

SUBJECT: I Nec	ed A Notary, Inc.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>ude súffix)</u>
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	l a check for:
\$70.00 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
FROM:	Sheryl D. Henderson		
	Name (Printed or typed)		
	961 NE 6th St		
		Address	
	Ocala, Fl. 34470		
	City	y, State & Zip	
	352-266-5951	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:

I Need A Notary, Inc.

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TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

961 NE 6th Street, Ocala, FL. 34470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to provide Notary Services in Florida.

ARTICLE IV SHARES

The number of shares of stock is:

2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Sheryl D. Henderson, P, V, S, T

961 NE 6th Street

Ocala, FL. 34470

ARTICLE VI REGISTERED AGENT

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

Sheryl D. Henderson 961 NE 6th Street

Ocala, FL. 34470

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sheryl D. Henderson

961 NE 6th Street

Ocala, FL. 34470

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