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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

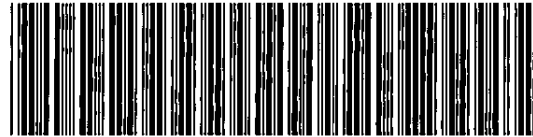
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CS. 11-13

Allen C. Wohlwend, CPA, P.A.

Tax, Accounting & Financial Planning Services

November 1, 2007

Ms. Doris Brown
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314

RE: New corporation filing to be known as **Certified Hurricane Specialists, Inc.**,
located at 3810 W DeLeon Street, #2, Tampa, Hillsborough County, Florida

Dear Ms. Brown:

Enclosed please find two copies of the Articles of Incorporation for the requested name of **Certified Hurricane Specialists, Inc.** I have also included the \$78.75 check for the applicable filing fee. I appreciate you processing this request as soon as possible.

If I can be of further assistance, or if you require any additional information, please do not hesitate to contact me directly at (813) 261-2743. Thank you for your assistance and consideration.

Sincerely,



Allen C. Wohlwend, CPA

Enclosures-

Articles of Incorporation (2 copies)
Check

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**ARTICLES OF INCORPORATION
OF
CERTIFIED HURRICANE SPECIALISTS, INC.**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby executes and acknowledges these Articles of Incorporation for the purpose of forming a corporation for profit under and by virtue of the laws of the State of Florida as contained in the Florida Business Corporation Act, Chapter 607, *Florida Statutes*.

ARTICLE I NAME

The name of the corporation shall be:

Certified Hurricane Specialists, Inc.

ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS

The principal place of business and mailing address of this corporation shall be:

3810 W DeLeon Street #2
Tampa, FL 33609

ARTICLE III BUSINESS PURPOSE AND POWERS

The purpose of the business is to engage in and transact any lawful business, acts, or activities which are deemed appropriate and suitable given the skills and capabilities of management.

This corporation may exercise all powers, rights, and privileges conferred on corporations pursuant to the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Barbara A. Keslinke
3810 W. DeLeon Street #2
Tampa, FL 33609

ARTICLE VI INITIAL OFFICER

The name and street address of the initial officer of this corporation is:

Barbara A. Keslinke President
3810 W. DeLeon Street #2
Tampa, FL 33609

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ARTICLE VII INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Barbara A. Keslinke (100 percent shareholder)
3810 W. DeLeon Street #2
Tampa, FL 33609

The undersigned incorporator has executed these Articles of Incorporation this
1st day of November, 2007.

I UNDERSTAND AND ACCEPT THE DUTIES AS
REGISTERED AGENT FOR THE ABOVE
MENTIONED CORPORATION.

Barbara Keslinke
Signature (Incorporator/Registered Agent)