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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 FEB -4 PM 2:57

EP 2/6/08

## COVER LETTER

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

**SUBJECT: Tax Benefit Consultants PA**

**(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: Bhola N Aneja**

Name (Printed or typed)

**18306 Sturbridge Ct**

Address

**Tampa FL 33647-2403**

City, State & Zip

**813-817-4790**

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:

**Tax Benefit Consultants PA**

## **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address is:

18306 Sturbridge Ct  
Tampa FL 33647-2403

## **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

Financial consulting and product sales

## **ARTICLE IV      SHARES**

The number of shares of stock is:

**1000**

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

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

Bhola N Aneja  
18306 Sturbridge Ct  
Tampa FL 33647-2403

President

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**ARTICLE VI REGISTERED AGENT**

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

Bhola N Aneja  
18306 Sturbridge Ct  
Tampa FL 33647-2403

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Bhola N Aneja  
18306 Sturbridge Ct  
Tampa FL 33647-2403

\*\*\*\*\*

*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*

Bhola N Aneja

Signature/Registered Agent

1/28/2008

Date

Bhola N Aneja

Signature/Incorporator

1/28/2008

Date

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