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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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DIVISION OF CORPORATIONS

EP 3/25/08

COVER LETTER

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

SUBJECT:	· ·	unting, INC.	
· .	·	PORATE NAME - MUST INCL	
1	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:		Name (Printed or typed) Address Oring 5, F2 327	708
•	407-25	City/State & Zip 12-5605 Time 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: RM Accounting, Inc. ARTICLE II PRINCIPAL OFFICE The principle street address and mailing address, if different is: 1454 Casa Park Cir Winter Springs Fr 32714 ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: Any and All bawful business ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Ramon Martinez -> C.E.O. 1454 Casa Park Cir Winter Springs # 32708 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Ramon Martinez 1454 Casa Park Cir Winter Springs, FL 32708 ARTICLE VII INCORPORATOR The <u>name and address</u> of the Incorporator is: Kamon Martinez Cir. Winter Springs, FL 32708 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