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COVER LETTER

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

Tallahassee, FL 323	314		
SUBJECT: Nationa	I Center for Professional Business	Practices, Incorporated TE NAME – MUST INCL	UDE SUFFIX)
	(1100 0000 0000 0000		
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: <u>Ed</u>	ward J. Owens	(Printed or typed)	
		(rrinted or typed)	
	1215 Alapaha Lane	Address	
	Orlando, FL 32828	State & Zip	
	901-592-9693		

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

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:

National Center for Professional Business Practices, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

6324 Pickney Hill Road Tallahassee, FL 32312



ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide standardization services and products for professional business practices such as; Project Management, Financial Management, etc.

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000.00

<u>ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS</u>

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

Edward J. Owens, 1215 Alapaha Lane Orlando, FL 32828, Chairman/CEO Dr. Ellen S. Owens, 1213 Blackwater Pond Orlando, FL 32828, Executive Vice President

Suzanne O. Martin, 6324 Pickney Hill Road Tallahassee, FL 32312, Executive Vice President

ARTICLE VI REGISTERED AGENT

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

Suzanne O. Martin

6324 Pickney Hill Road Tallahassee, FL 32312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Edward J. Owens

1215 Alapaha Lane Orlando, FL 32828

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

Sugar Master

Signature/Registered Agent

Date

Signature/Incorporator

Date