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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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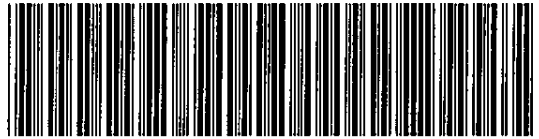
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
HALLAMSBURG, IOWA

COVER LETTER

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

SUBJECT: TCB Accounting Associates Inc.
(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: PATRICIA ANN CHIDESTER
Name (Printed or typed)

4251 Pinewood Ave
Address

Jacksonville, FL 32207
City, State & Zip

904-636-5766
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:

TCB Accounting Associates Inc.

ARTICLE II PRINCIPAL OFFICE

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

4251 Pinewood Ave
Jacksonville FL 32207

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Small business accounting + income tax preparation

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Patricia Ann Chidester - President
John Sheridan Chidester - Vice president

ARTICLE VI REGISTERED AGENT

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

Patricia Ann Chidester
4251 Pinewood Ave
Jacksonville FL 32207

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Patricia Ann Chidester
4251 Pinewood Ave
Jacksonville FL 32207

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

Patricia Ann Chidester

Signature/Registered Agent

Patricia Ann Chidester

Signature/Incorporator

11-7-08

Date

11-7-08

Date

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CLERK OF COURT
JULIA H. STEVENS, CLERK