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(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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COVER LETTER

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

SUBJECT:	E-Z TAX FILLING PLUS, INC			
	(PROPOSED CORPORA			
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	WI Name (LLY JOSEPH Printed or typed)		
	1271 PEREGRINE WAY			
	Address			
	WESTON, FLORIDA 33327			
	City, State & Zip			
		596-1354		
	Davtime I	elephone 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:

E-Z TAX FILLING PLUS, INC

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 2910 NORTH ANDREWS AVENUE WILTON MANORS, FLORIDA 33311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 500 SHARES @ 1.00 PAR

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
WILLY JOSEPH PRESIDENT
1271 PEREGRINE WAY
WESTON, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: WILLY JOSEPH 1271 PEREGRINE WAY WESTON, FLORIDA

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: WILLY JOSEPH 1271 PEREGRINE WAY WESTON, FLORIDA

e stated corporation at the place designated in this agree to act in this capacity
02/19/2009
Date
02/19/2009
Date