

P09000035008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

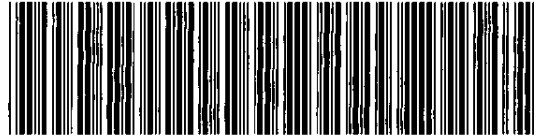
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W09-16972

Office Use Only

Robin William GAOI
AUTHORIZATION BY PROXYING
CORRECT Article
DATE 4-20-09
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04/09/09--01030--006 **78.75

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2009 APR 17 PM 4:46
TALLAHASSEE STATE
FILING OFFICE
FLORIDA

T. Burch HFK 20 2009

COVER LETTER

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

SUBJECT: S R A Business Services, 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: Robin S. Williams

Name (Printed or typed)

PO Box 695419

Address

Miami, Florida 33269

City, State & Zip

786-553-9275

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

09 APR 17 AM 11:43

DIVISION OF CORPORATION

April 10, 2009

ROBIN S. WILLIAMS
PO BOX 695419
MIAMI, FL 33269

SUBJECT: S R A BUSINESS SERVICES, INC.
Ref. Number: W09000016972

We have received your document for S R A BUSINESS SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 109A00012181

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:

S R A Business Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

19220 N W 5th CT.
Miami, FL 33169

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Insurance Services / Agent
Notary

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):

Robin S. Williams, PO Box 695419, Miami, FL 33269 - Director
Rufus Williams, PO Box 695419, Miami, FL 33269 - Director
Alysia Williams, PO Box 695419, Miami, FL 33269 - Director

FILED
2009 APR 17 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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


Robin S. Williams
19220 N W 5th Ct.
Miami, FL 33169

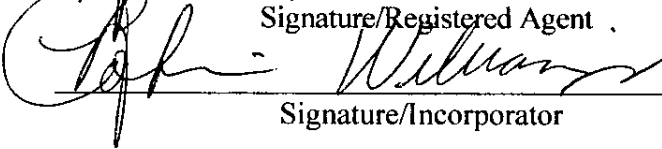
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robin S. Williams
PO Box 695419
Miami, FL 33269

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



Signature/Registered Agent


Signature/Incorporator

4/15/09
Date
4/15/09
Date