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COVER LETTER

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

SUBJECT:	Masson & Associates Accounting Services, Inc.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l 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
		ADDITIONAL CO	PY REQUIRED
FROM:	Osn Nam	nel Masson e (Printed or typed)	
	8440 SW 8 Street Apt 506 Address		
	Miami, City	Florida 33144 , State & Zip	
	305-282-4132 Daytime Telephone number		
	masson.asso E-mail address: (to be use	ociates@yahoo.com ed for future annual report i	notification)

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:

Masson & Associates Accounting Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

8440 SW 8 Street Apt 506 Miami, Florida 33144

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Accounting, Bookeeping & Tax Service

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):

Osmel Masson - President 8440 SW 8 Street Apt 506 Miami, Florida 33144

ARTICLE VI REGISTERED AGENT

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

Osmel Masson 8440 SW 8 Street Apt 506 Miami, Florida 33144

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Signature/Incorporator

Osmel Masson 8440 SW 8 Street Apt 506 Miami, Florida 33144

Miami, Florida 33144	
****************	************
Having been named as registered agent to accept service of place designated in this certificate, I am familiar with and agree to act in this capacity Alle Masser	
Signature Registered Agent	Date
Emel Massni	7/13/09

Date