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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000150  
Phone : (800)494-3124  
Fax Number : (561)456-9885

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
PROFOUND FINANCIAL SERVICES INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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MRS 1/21/11

4-11000016559-3

## **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:

PROFOUND FINANCIAL SERVICES INC.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

4536 NIKKI COURT #4  
ORLANDO, FLORIDA 32822

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

### **ARTICLE IV SHARES**

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

### **ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)**

The name(s), address(es), and title(s) of the directors and officers is/are:

PRESIDENT

ARACELY ZEPEDA

4536 NIKKI COURT #4  
ORLANDO, FLORIDA 32822

SECRETARY

HELLEN WALKER

4536 NIKKI COURT #4  
ORLANDO, FLORIDA 32822

VICE PRESIDENT

ERIC WALKER

4536 NIKKI COURT #4  
ORLANDO, FLORIDA 32822

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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

ARACELY ZEPEDA  
4536 NIKKI COURT #4  
ORLANDO, FLORIDA 32822

**ARTICLE VII INCORPORATOR**

The name and street address of the Incorporator is:

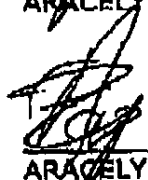
ARACELY ZEPEDA  
4536 NIKKI COURT #4  
ORLANDO, FLORIDA 32822

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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.

  
\_\_\_\_\_  
ARACELY ZEPEDA / Registered Agent

1.20.11  
Date

  
\_\_\_\_\_  
ARACELY ZEPEDA / Incorporator

1.20.11  
Date

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