

P11000016723

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
2/17

COVER LETTER

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

SUBJECT: Watson Financial 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: Michael R. Watson

Name (Printed or typed)

2810 N. E. 52nd Street

Address

Fort Lauderdale, Florida 33308

City, State & Zip

954-351-5401

Daytime Telephone number

mike@michaelrwatsoncpa.com

E-mail address: (to be used for future annual report notification)

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



RECEIVED

11 FEB 16 PM 12:41

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 4, 2011

MICHAEL R. WATSON
2810 N.E. 52ND STREET
FORT LAUDERDALE, FL 33308

SUBJECT: WATSON FINANCIAL SERVICES, INC.
Ref. Number: W11000006978

NAME SHOULD BE M.R. WATSON FINANCIAL SERVICES, INC.

We have received your document for WATSON FINANCIAL SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 011A00003036

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

11 FEB 16 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME MR. Watson Financial Services, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
2810 N. E. 52nd Street
Fort Lauderdale, Florida 33308

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: The corporation is authorized to issue five-hundred shares (500) of \$1 par value common stock, which shall be designated "Common Shares".

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Watson, President
Address: 2810 N. E. 52nd Street
Fort Lauderdale, Florida 33308

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

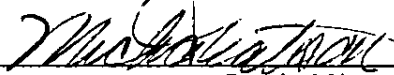
Name: Michael R. Watson
Address: 2810 N. E. 52nd Street
Fort Lauderdale, Florida 33308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michael R. Watson
Address: 2810 N. E. 52nd Street
Fort Lauderdale, Florida 33308

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



Required Signature/Registered Agent

January 29, 2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

January 29, 2011

Date