P11000072836

(Requestor's Name)				
(Ad	dress)	·		
(Address)				
(Cit	ty/State/Zip/Phone #	‡)		
	_	_		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates o	of Status		
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2011 AUG 12 PM 4: 36
SECRETARY OF STATE
TALL AHASSEE FLORIDA

T Burch MS 152011:

COVER LETTER

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

SUBJECT: MTJ Tax Consultants LLC (More Than Just Tax Consultants) (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Pamela Starkey Name	(Printed or typed)
7335 nw 19th court	ddress
Pembroke Pines FL 330 City, S	24 State & Zip
954-553-0333 Daytime Te	elephone number
Pamter@bellsouth.net E-mail address: (to be used	for future annual report notification)

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



RECEIVED 11 AUG 12 AM II: 83

FLORIDA DEPARTMENT OF STATEDN OF CORPORATIONS Division of Corporations

August 2, 2011

PAMELA STARKEY 7335 NW 19TH COURT PEMBROKE PINES, FL 33024

SUBJECT: MTJ TAX CONSULTANT LLC

Ref. Number: W11000040381

We have received your document for MTJ TAX CONSULTANT LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please remove the LLC, and use one that is listed above.

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: 111A00018113

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II	PRINCIPAL OFFICE Principal street address	Mailing address, if differe	ent is:	
	7335 nw 19th court	P.O. Box 552346		
	Pembroke Pines FL 33024	Miami Gardens FI 33055		
RTICLE III	PURPOSE			
	which the corporation is organized is:			
Personal ta	x preparation and consulting			
		- A	2811	
			E S T	
RTICLE IV	SHARES nares of stock is: One	<u>, </u>		
ne number of si	iares of stock is. Offe	1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	LE I2:	
	INITIAL OFFICERS AND/OR DIRECT			
Name and	Title: Pamela Starkey (Director)	Name and Title:	S 2 0	
Address:	7335 nw 19th court Pembroke Pines FL 33024	Address:	===	
	Pemoroke Pines FL 33024		<u>ω</u> σ	
	Title:	Name and Title:		
Address:	<u>.,, , , , , , , , , , , , , , , , , , ,</u>	Address:		
				
N	T.41-			
Address:	Title:	Address:		
71001055.				
	REGISTERED AGENT	afthe maintand point in		
ne <u>name and r</u> Name:	lorida street address (P.O. Box NOT acceptable Pamela Starkey			
Address:	7335 nw 19th court			
	Pembroke Pines FL 33024			
	INCORPORATOR			
	ddress of the Incorporator is:			
Name:	Pamela Starkey			
Address:	7335 nw 19th court			
	Pembroke Pines FL 33024			
	med as registered agent to accept service of pro am familian with and accept the appointment as			
dans	On Starban		08 /06 /2011	
CIMIN	Required Signature/Registered Agent	00,007	Date	
	cument and affirm that the facts stated herein Department pf State constitutes a third degree f			
Laboral	task.			
rancell	2 Jaroll	08/06/2		
•	Required Signature/Incorporator		Date	