P11000092563

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| • | | |
| | | |

Office Use Only



900213358999

10/21/11--01019--002 **70.00

SECRETARY OF STATE PALLAHASSEE, FLORIDA





COVER LETTER

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

| SUBJECT: Precise Accounting & | | |
|--|-------------------------------------|--|
| (PROPOSED CORPORA) | TE NAME – <u>MUST INCI</u> | LUDE SÜFFIX) |
| Enclosed are an original and one (1) copy of the artic | eles of incorporation an | d a check for: |
| \$70.00 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| | ADDITIONAL CO | JPY REQUIRED |
| FROM: Vijaiantie Jadnauth Name | (Printed or typed) | |
| 3936 S. Semoran Blvd | d., Suite 289 | |
| A | ddress | |
| Orlando, Fl 32829 | | |
| City, S | State & Zip | |
| 407 257 0588 | | |
| Daytime Te | elephone number | |
| precisetaxes@gmail.c E-mail address: (to be used | om | notification) |
| E-mail address: (to be used | tor tuture annual report | поинсацоп) |

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)

Although the

| DATOLE II | corporation shall be: | | 4.4.4 |
|-------------------------------------|--|----------------------|-----------------------------------|
| R HULLE H | PRINCIPAL OFFICE | | 11 OCT 21 PM 12: 48 |
| | Principal street address | N | Mailing address, if different is: |
| | 1877 S. Orange Blossom Trail | _3936 S | Semoraro Blad Suite 289 ATC |
| | Orlando, Fl. 32805 | _Orlando | O. FI 328 LAHASSEE FLORIDA |
| | | | |
| | PURPOSE which the corporation is organized is: | | |
| Profit | · | | |
| RTICLE IV | SHARES pares of stock is:1000 | | |
| | | | |
| | INITIAL OFFICERS AND/OR DIRECTOR: Title: Vijaiantie Jadnauth - officer | | |
| Address: | 3936 S. Semoran Blvd., Suite289 | | |
| Audiess, | Orlando, Fl_32822 | | |
| | | | |
| Name and ' | Title: | Name and Title: | |
| Address: | | | |
| | | | |
| Name and Taddress: | Title: | | |
| | | | |
| RTICLE VI | REGISTERED AGENT | | |
| | lorida street address (P.O. Box NOT acceptable) of | the registered agent | t is: |
| Name: | Vijajantie Jadnauth | | |
| Address: | 1877 S Orange Blossom Trail | | |
| | Orlando, Fl. 32805 | | |
| | THEODERA MOD | | |
| RTICLE VII | <u>INCORPORATOR</u> ddress of the Incorporator is: | | |
| | Vijaiantie Jadnauth | | |
| | 3936 S. Semoran Blvd., Suite 28 | n O | |
| Name: | - J330 S. SEIHUIAH DIVU., SUILE ZO | J | |
| | Orlando, Fl 32822 | | |
| Name: Address: aving been nam | Orlando, Fl 32822 ned as registered agent to accept service of process am familiar with and accept the appointment as regis | | |
| Name: Address: aving been nam | Orlando, Fl 32822 ned as registered agent to accept service of process | | |

Required Signature/Incorporator