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PICK-UP	☐ WAIT	MAIL
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Continue Company	Cortificator	of Status
Certified Copies	Certificates	S OI Status
Special Instructions to F	Filing Officer:	
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DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLIGHASSEE, FLORIDA

RECEIVED

12 APR 17 PH 4: 15 DECRETARY OF STATE ALLAHASSEE, FLORING

T. Burch APR 1 8 2012

CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

RELIABLE TAX SO	DLUTIONS, IN	IC.		
		i		
				
			<i></i>	Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
		į		L.C. File
				Fictitious Name File
				Trade/Service Mark
		1		Merger File
		Ì		Art. of Amend. File
				RA Resignation
				Dissolution / Withdrawal
		ł		Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
			Fictitious Owner Search	
Signature				Vehicle Search
				Driving Record
Requested by: BN		ļ		UCC 1 or 3 File
<u>U4/1//12</u>				UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

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

SUBJECT:	Reliable Tax Solution	ns, Inc.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	UDE SUFFIX)		
Enclosed are an or	iginal and one (1) copy of the arti	icles of incorporation an	d a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED		
FROM:	Gale Parri				
	Name	(Printed or typed)	-		
	646 Hillside Ave.				
	Address				
	Orlando, FL 32803				
_	City, State & Zip				
	954-868-8248				
_	Daytime T	elephone number			
<u>.</u>	-	ionins@aol.com			
	E-mail address: (to be use	o ioi iuture annuai report	nonneamon)		

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: Reliable To	ax Solutions, Inc.
ARTICLE II PRINCIPAL OFFICE	
Principal atract address	Mailing address, if different is:
646 Hillside Ave.	reading spotess, it different is.
Orlando, FL 32803	
	SE 12
ARTICLE III PURPOSE	<u> </u>
The purpose for which the corporation is organized is:	APR LAIM
Computer Technical Support	To The second se
Computer recommends support	ARY ARY
	or the second of the second o
ARTICLE IV SHARES	
The number of shares of stock is: 1,000	्रिक्षः ा
•	
ARTICLE V INITIAL OFFICERS AND/OR DI	
	ident Name and Title:
Address: 5885 NW 19th Stre	
<u>Lauderhill, FL 33</u>	<u> </u>
Name and Title:	Name and Title:
Address:	Address:
Apuless.	
	
Name and Title:	Name and Title:
Address:	Address:
ADMOLD W. DECISORED ACENT	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acc	sentehle) of the reciptor of agent in
Name: Melvyn Trute	cepapie) of the registered agent is.
Address: 1090 Kane Conco	nurse #202
Bay Harbor Isla	
<u></u>	1100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Gale Parris	<u> </u>
Address: 5885 NW 19th Stre	
Lauderhill, FL 33	<u>313 </u>
Tt. 1 1 1	and manage for the above extend comparation at the place decimated in
Having been named as registered agent to accept service this certificate, I am familiar with and accept the appoints	e of process for the above stated corporation at the place designated in
this certificate, I am Januar wan and accept the appoint	The state of the s
YIII VALUE CONTRACTOR	1/12/17
- My Comment	
Required Signature/Registered	Agent Pate
Touchards this description of affine that the forms added	herein are true. I am aware that the false information submitted in a
I submit this document and affirm that the facts stated document to the Department of State constitutes a third de	ncrean are uses, I am aware out the juste atjointmen is second to a large along the provided for in \$ \$17.155. F.C.
sociament to the trepartment of Suite constitutes a third at	egies journe province jor of 2017/100) 1 am
$\mathcal{T} \setminus \mathcal{N} \setminus \mathcal{T}$	1/19/19
Required Signature/Incorpor	votor Date
Keguired Signature/Incorpor	lawi / Yac