## P12000057926

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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06/27/12--01011--005 \*\*78.75



n 06/28/12

## **COVER LETTER**

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

## SUBJECT: MOTIVATION TAX & FINANCIAL SERVICES, INC. (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 Filing Fee & Certificate of Status	\$78.75  Filing Fee  & Certified Copy  & Certificate of Status  ADDITIONAL COPY REQUIRED
FROM: MOTIVATION TAX & FINAN	ANCIAL SERVICES, INC. (Printed or typed)
11956 SW 32nd STREET	ddress
MIRAMAR FLORIDA, 33 City, 5	3025 State & Zip
954 612 3387  Daytime Te	elephone number
celianebrnis@yahoo.com E-mail address: (to be used	CELIANEBRU(SQ) 4Ahvo COM for future annual report notification)

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 The name of the co	NAME MOTIVATION TAX & prporation shall be:	FINANCIAL SERVICE	ES, INC.
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing:	address, if different is:
	11956 SW 32nd street		
	MIRAMAR FL, 33025		
	DIMPOGR	<del>-</del>	
The nurpose for w	hich the corporation is organized is:		
	X & OTHER FINANCIAL SERVICE	S.	
ARTICLE IV	<del></del>		
The number of sha	res of stock is 50		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	ORS	
Name and T	itle:CELIANE BORNELUS PRES		NIO JEAN CHARLES, VI
Address:	7140 HOOD STREET		HOOD STREET
	HOLLYWOOD FLORIDA, 33024	HOLL	YWOOD FLORIDA, 3302
Nome and T	itle: DWIGHT R. ISMAEL TREASUR	ED Name and Title:	
Address:	7140 HOOD STREET		
Audicss.	HOLLYWOOD FLORIDA, 33024	Address.	<del>.</del>
	TIOLETWOODT LONIDA, 33024		
Name and Ti	itle:	Name and Title:	
Address:		Address:	
	to the state of th		
RTICLE VI	REGISTERED AGENT		
	rida street address (P.O. Box NOT acceptable)	) of the registered agent is:	
Name:	CELIANE BORNELUS	, 0. 2.0 108.00.00 48.00 20.	
Address:	7140 HOOD STREET	<del></del>	The state of the s
	HOLLYWOOD FL 33024	<del></del>	
	·	<del></del>	Contract of
	<u>INCORPORATOR</u>		
	Iress of the Incorporator is:		
Name:	CELIANE BORNELUS		
Address:	7140 HOOD STREET HOLLYWOOD FL 33024		
aving been name	ed as registered agent to accept service of proc	ess for the above stated corpo	oration at the place designated i
is certificate, I an	n familiar with and accept the appointment as i	registered agent and agree to a	ict in this capacity
1/00	ane Boundly		06/25/2012
	Required Signature/Registered Agent	<u></u>	Date
submit this docu	ment and affirm that the facts stated herein a	ire true. I am aware that the	false information submitted in
cument to the De	epartment of State constitutes a third degree fel	ony as provided for in s.817.15	55, F.S.
Célia,	ul & Muelles	··-·	06/25/2012
	Required Signature/Incorporator		Date