

P/2000/00875

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

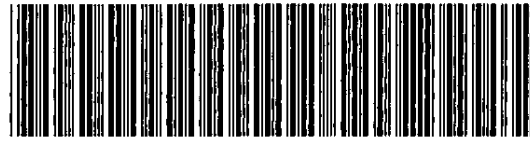
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 DEC 10 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 01/01/13

COVER LETTER

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

SUBJECT: PI TAX SERVICRS 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: **PETER ILICH**

Name (Printed or typed)

713 NE 8th ST - OFFICE

Address

HALLANDALE BEACH, FLORIDA 33009

City, State & Zip

954-458-2675

Daytime Telephone number

ILICHP@AOL.COM

E-mail address: (to be used 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 NAME

The name of the corporation shall be: **PI TAX SERVICES INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address
713 NE 8th ST - OFFICE
HALLANDALE BEACH FL 33009

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **STARTING A NEW BUSINESS - INCOME TAX PREPARATION**

EFFECTIVE DATE OF THIS CORPORATION SHALL BE JANUARY 1, 2013.

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>PETER ILICH - PRESIDENT</u>	Name and Title: _____
Address: <u>713 NE 8th ST - OFFICE</u>	Address: _____
<u>HALLANDALE BEACH FL 33009</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: PETER ILICH
Address: 713 NE 8th ST - OFFICE
HALLANDALE BEACH FL 33009

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: PETER ILICH
Address: 713 NE 8th ST - OFFICE
HALLANDALE BEACH FL 33009

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

Peter Ilich
Required Signature/Registered Agent

12-4-12
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.

Peter Ilich
Required Signature/Incorporator

12-4-12
Date

EFFECTIVE DATE 01/01/13