Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000051030 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number

: (850)617-6381

From:

To:

Account Name

: INCORPORATING SERVICES FL

Account Number : I20050000052

: (850)656-7956

Phone Fax Number

: (850)656-7953

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

michael.corbett@iaop.org Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION IAOP, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

MAR 0 2 2015

T. SCOTT

Electronic Filing Menu

Corporate Filing Menu

Help

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

ARTICLE I	NAME			
The name of	f the corporation shall be: IAOP,	Inc.		
ARTICLE II	PRINCIPAL OFFICE			
Princi	pal street address	Mailing address, if different is:		
4333 Indian Windermere	Deer Road FL 34786			
ARTICLE III	PURPOSE			
The purpose under Florida		anized is: Any lawful purpose permitted		
ARTICLE IV	SHARES			
The number	of shares of stock is: 1,000			
ARTICLEV	INITIAL OFFICERS AND/	OR DIRECTORS		
Name and T Address:	itle: Michael F. Corbett, Pres 4333 Indian Deer Road Windermere, FL 34786	ident/Vice President/Treasurer 		
Name and T Address:	itle: <u>Deborah L. Corbett, Sec</u> 4333 Indian Deer Road Windermere, FL 34786		15 FEB 27	
ARTICLE VI	REGISTERED AGENT		P	
The name ar	nd Florida street address of the r	egistered agent is:	PH 12: 00	
Name: Address:	Michael F. Corbett 4333 Indian Deer Road Windermere, FL 34786		0	3

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Michael F. Corbett

Consider the Constitution of the Constitution

Address:

4333 Indian Deer Road

Windermere, FL 34786

ARTICLE VIII EFFECTIVE DATE

The corporate existence shall begin on March 15, 2015.

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 appointment as registered agent and agree to act in this capacity.

Required Signature/Registered Agent

2 26 2015

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.617.155, F.S.

Required Signature/Incorporator

2/26/2015

Date