

P16000011468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

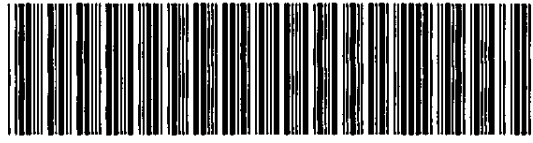
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



400280086924

01/26/16--01002--030 **78.75

EFFECTIVE DATE
1-25-16

FILED
2016 JAN 26 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB - 4 2016

T. BROWN

COVER LETTER

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

SUBJECT: Burt Tax 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: Henry Burt
Name (Printed or typed)
3991 Pepper Place
Address
Cocoa, Fl. 32926
City, State & Zip
3216523808
Daytime Telephone number
jbbsmn2lbs@yahoo.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)

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TALLAHASSEE, FLORIDA

ARTICLE I NAME Burt Tax Inc.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address _____ Mailing address, if different is: _____
3991 Pepper Place _____
Cocoa Fl. 32926 _____

ARTICLE III PURPOSE to provide tax planning, preparing and representation services.
The purpose for which the corporation is organized is: _____

EFFECTIVE DATE
1-25-16

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Henry Burt President/Secretary	Name and Title:	_____
Address	3991 Pepper Place	Address:	_____
	Cocoa, Fl. 32926		_____
	_____		_____

Name and Title:	Patricia Burt Vice President	Name and Title:	_____
Address	3991 Pepper Place	Address:	_____
	Cocoa, Fl. 32926		_____
	_____		_____

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: Henry Burt
Address: 3991 Pepper Place
Cocoa, Fl. 32926

ARTICLE VII INCORPORATOR

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

Name: Henry Burt
Address: 3991 Pepper Place
Cocoa Fl. 32926

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/25/2016. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Required Signature/Registered Agent
01/21/2016
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.

Required Signature/Incorporator
01/21/2016
Date