

P16UUD 75988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

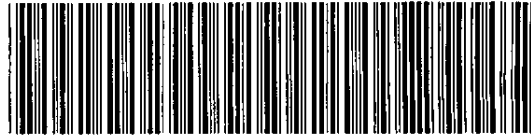
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SEP 15 2015

T. SCOTT



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16 SEP 12 AM 10:36

COVER LETTER

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

SUBJECT: New Horizons Tax Resolution, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: J.C. Green

Name (Printed or typed)

720 West Burleigh Blvd.

Address

Tavares, Florida 32778

City, State & Zip

228-868-1111

Daytime Telephone number

jcgreenmtrs@cableone.net

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: New Horizons Tax Resolution, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

720 West Burleigh Blvd.

Tavares, FL 32778

Mailing address, if different is:

627 Charleston Lane

Long Beach, MS 39560

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Tax Resolution Consulting Services

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: J.C. Green, Director/President

Address 720 West Burleigh Blvd.

Tavares, FL 32778

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

10 SEP 12 AM 10:36

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: J. C. Green

Address: 720 West Burleigh Blvd.

Tavares, FL 32778

ARTICLE VII INCORPORATOR

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

Name: J.C. Green

Address: 720 West Burleigh Blvd.

Tavares, FL 32778

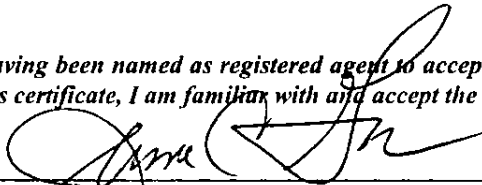
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

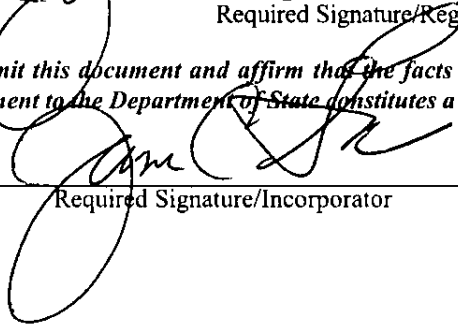


Required Signature/Registered Agent

9-8-16

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

9-8-16

Date