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(Requestor's Name)				
	(Address)			
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	(City/State/Zip/Phone #)			
PICK-UP	MAIL MAIL			
	(Business Entity Name)			
	(,			
	(Document Number)			
	(Sociality)			
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Special Instructions to	Filing Officer.			

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S. CHATHAM SEP, 2202

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COVER LETTER

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

SUBJECT:	Daniel D	Daniel Dowell, CPA, P.A.					
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)				
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:				
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	& Certificate o Status				
		ADDITIONAL CO	DPY REQUIRED				
FROM:	Steven R. Berger Name (Printed or typed) c/o Vedder Price, P.C., 1633 Broadway, 31st Floor						
	CO Vedder Frice,	Address					
	New Y	ork, NY 10019					
	. State & Zip						
212-407-7714							
	Daytime Telephone number sberger@vedderprice.com						
	E-mail address: (to be used for future annual report notification)						

NOTE: Please provide the original and one copy of the articles.

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE: 899774 4348220
AUTHORIZATION :
COST LIMIT: \$ 70.00
ORDER DATE : August 22, 2022
ORDER TIME : 9:21 AM
ORDER NO. : 899774-220
CUSTOMER NO: 4348220
DOMESTIC FILING
NAME: DANIEL DOWELL, CPA, P.A.
EFFECTIVE DATE:
XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP
ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker - EXT.
EXAMINER'S INITIALS:

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

MCHCLEH PRO	SCIDAL ARRICE			
Principal OFFICE Principal street address (o Marcum S Corp Legal, 10 Melville Park Road Melville, NY 11747		Mailing addres	Mailing address, if different is:	
IRTICLE III PURI The purpose for which	POSE at the corporation is organized is:	countancy		
			<i>8</i> €	
			22 SEP - 1	
	of stock is:	par valu	CORPORATION	
	IAL OFFICERS AND/OR DIRECTORS		<i>'</i>	
Name and Ti	Daniel Dawell President	Name and Title:	**	
	Daniel Dowell, President			
Name and Ti	Daniel Dowell, President			
Name and Ti Address	Daniel Dowell, President 3004 Euclid Avenue	Address:		
Name and Ti Address	Daniel Dowell, President 3004 Euclid Avenue Tampa, FL 33629	Address: Name and Title: Address:		
Name and Ti Address Name and Titl	Daniel Dowell, President 3004 Euclid Avenue Tampa. FL 33629	Address: Name and Title: Address:		
Name and Ti Address Name and Titl Address	Daniel Dowell, President 3004 Euclid Avenue Tampa. FL 33629	Address: Name and Title: Address:		
Name and Ti Address Name and Titl Address	Daniel Dowell, President 3004 Euclid Avenue Tampa, FL 33629	Address: Name and Title: Address: Name and Title:		

Name ai	nd Title:	Name and Title:		
Addres	s	Address:		
	REGISTERED AGENT Storida street address (P.O. Box NOT acceptal	ala) of the registered goest is:		
Name:	Daniel Dowell	of the registered agent is.		
	3004 Euclid Avenue			
	Tampa, FL 33629		2 9	
ARTICLE VII	INCORPORATOR		SECRE	
The name and a	ddress of the Incorporator is:		1 0m 1 0m 1 man 1 man	
Name:	Daniel Dowell		PA SHOPE	
Address:	3004 Euclid Avenue		STATE GRATION 3: 05	
	Tampa, FL 33629	·	S	
Effective date, if	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and o	. (OPTIONAL) cannot be more than five days pri	ior or 90 days after the	
	e inserted in this block does not meet the applieffective date on the Department of State's rec		this date will not be listed as	
	ned as registered agent to accept service of pro familiar with and accept the appointment as re			
Variet Dowell			Aug 19, 2022	
Required Signature Registered Agent		t	Date	
	cument and affirm that the facts stated herein Department of State constitutes a third degree			
	Daniel Dowell		Aug 19, 2022	
Required Signate	ure/Incorporator ExcessExami	Dat	e	