

FD9500022985

MIND OVER TAXES/
Tax Advisors, Inc.

AL CLARK
LICENSED MORTGAGE BROKER
TAX CONSULTANT

12600 S. Belcher Rd. • Suite 104E • Largo, FL 34643
813-574-3111 • Fax 813-399-0867 • 1-800-YOUR CORP

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-03/21/95--01003--013
*****70.00 *****70.00

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Bookkeeping & Clerical Services Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

D. BROWN MAR 22 1995

Examiner's Initials

ARTICLES OF INCORPORATION
OF

FILED
95 MAR 20 11 9:48
CLERK OF DISTRICT COURT
MILWAUKEE, WISCONSIN

BOOKKEEPING & CLERICAL SERVICES INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

BOOKKEEPING & CLERICAL SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

410 - G 150 TH. AVENUE
MADEIRA BEACH FL. 33708

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 SHARES
NO PAR.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GLORIA RUSSELL
410 - G 150 TH. AVENUE
MADEIRA BEACH FL. 33708

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

GLORIA RUSSELL
343 BOCA CIEGA DRIVE
MADEIRA BEACH FL. 33708

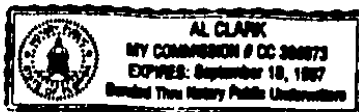
The undersigned has(have) executed these Articles of Incorporation this

15TH day of MARCH, 19 95

Gloria Russell / President
Signature/Title

Signature/Title

Signature/Title



**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: BOOKKEEPING & CLERICAL
SERVICES INC.

2. The name and address of the registered agent and office is:

GLORIA RUSSELL
(Name)

410 - G 150TH AVENUE
(P.O. Box not acceptable)

MADRID BEACH FL. 33708
(City/State/Zip)

FILED
55 MAR 20 PM 9:48
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Gloria Russell
(Signature)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000022985**

1. Corporation Name

BOOKKEEPING & CLERICAL SERVICES INC.

FILED

96 NOV 20 AM 11:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

410-G 150TH AVENUE
MADEIRA BEACH FL 33708

Mailing Address

410-G 150TH AVENUE
MADEIRA BEACH FL 33708

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 96

2. New Principal Office Address, if Applicable

343 Boca Ciega Drive
Suite, Apt. #, etc.

3. New Mailing Office Address, if Applicable

343 Boca Ciega Drive
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

03/20/1985

5. FEI Number

59-3307863

Applied For

Not Applicable

City & State

MADEIRA BEACH, FL

City & State

MADEIRA BEACH, FL

Zip

33708

Country

PINELLAS

Zip

33708

Country

PINELLAS

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PRES	GLORIA RUSSELL TRUESDELL	343 Boca Ciega Drive	MADEIRA Beach, FL 33708
V. PR.	ROBERT B. TRUESDELL	343 Boca Ciega Drive	MADEIRA Beach, FL 33708
			900002011339--3 -11/22/96--01011--022 ****375.00 ****375.00

8. Name and Address of Current Registered Agent

RUSSELL, GLORIA
410-G 150TH AVENUE
MADEIRA BEACH FL 33708

9. Name and Address of New Registered Agent

Name

GLORIA RUSSELL TRUESDELL

Street Address (P.O. Box Number is Not Acceptable)

343 Boca Ciega Drive

Suite, Apt. #, Etc.

City

MADEIRA Beach, FL

State

FL

Zip Code

33708

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Gloria Russell Truesdell
REGISTERED AGENT MUST SIGN

Date

October 27, 1996

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Gloria Russell Truesdell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/27/96

Date

(313) 399-2113

Daytime Phone #

CRS-600 (7/96)