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

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SUBJECT: COMPLETE ACCOUNTING/TAX SERVICE OF MIAML. INC.
(Proposed corporate name - must include suffix)

for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate y Required			
FROM:	CHARLES R. SHERRER Name (printed or typed)					
	6011 N.W. 7th AVF Address MIAMI, FLA 33127 City, State & Zip			Āņ ch	95	
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	305-759-5006			<i>5</i> ()) 미국 미급	83	. व भेद्राष्ट्र
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NOTE: Please provide the original and one copy of the articles.

GB 3/25/96

ARTICLES OF INCORPORATION



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SECULARY OF SYME.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business in FLORIDA

Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

COMPLETE ACCOUNTING/TAX SERVICE OF MIAMI, INC.

ARTICLE II PRINCIPAL OFFICE

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

6011 N.W. 7th AVE MIAMI, FLA 33127

ARTICLE III SHARES

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

100 SHARES AT \$10.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

CHARLES SHERRER 6011 N.W. 7th AVE MIAMI, FLA 33127

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

CHARLES R. SHERRER, PRESIDENT 6011 N.W. 7TH AVE MIAMI, FLA 33127

The undersigned inco	rporator(s) has(have	e) executed these Articles of Incorporation this
day of	MARCH	, 19 <u>96</u>
(An additional article	must be added if an	effective date is requested.)
v	Chales.	Them
<u> </u>		Signature
		Signature
		Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:	COMPLETE	ACCOUNTING/TAX	SERVICE	OF MIAMI,	INC
2.	The name and address of the re	gistered agent	and office is:			_
		LES R. SHE				
		N.W. 7th Box or Mail Drop	AVE , p Box <u>NOT</u> acceptable)			10 To
	MIAM		127 State/Zip)		(1) (2) (3) (3) (4) (4) (4) (4) (5)	က် က က

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.

Mule Shew 3/12/96
(SIGNATURE) (DATE)