

P96000087/89

TRANSMITTAL LETTER

96 OCT 21 PM 4:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

800001982408--7
-10/22/96--01046--018
****122.50 ****122.50

SUBJECT: ACCOUNTING CONTROLS INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: ROBERT GARCIA
Name (printed or typed)

P.O. Box 27545
Address

TAMPA, FL 33623
City, State & Zip

(813) 251-0822
Daytime Telephone number

PH 10/22/96

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

ARTICLES OF INCORPORATION

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SECRETARY OF STATE

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:

ACCOUNTING CONTROLS, INC.

ARTICLE II PRINCIPAL OFFICE

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

8405 N. EDISON AVE, TAMPA, FL. 33604

MAILING ADDRESS: P.O. BOX 27545

TAMPA, FL. 33623

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ROBERT GARCIA

8405 N. EDISON AVE.

TAMPA, FL 33604

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):

ROBERT GARCIA
8405 N. EDISON AVE.
TAMPA, FL 33604

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

17 day of OCTOBER, 19 96.

Robert Garcia
Signature

Signature

Signature

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: ACCOUNTING CONTROLS, INC.
2. The name and address of the registered agent and office is:

ROBERT GARCIA
(NAME)

405 N. EDISON AVE.
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

TALLAHASSEE, FL. 33604
(CITY/STATE/ZIP)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

Robert Garcia
(SIGNATURE)

10/17/96
(DATE)