

# NAC

**CORPORATE OFFICE**  
55 Marietta Street  
Suite 2000  
Atlanta, GA 30303  
888-2-TAX-HELP  
770-453-8243 Fax

**FL REGIONAL OFFICE**  
✓ 1004 US Highway 19  
Suite 202  
Holiday, FL 34691  
813-944-3647  
813-937-1945 Fax

E-Mail: NACtax@nogaol.com

**NATIONAL ACCOUNTING CORPORATION**  
*Financial & Tax Solutions for Businesses & Individuals*

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*PLEASE RETURN TO:*

*P.O. Box 3547  
Holiday FL 34690*

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TALLAHASSEE, FLORIDA

Divisions of NAC

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"Building the Accounting & Financial Firm of the Future"

**ARTICLES OF INCORPORATION**

**OF**

**NAC Group Benefit Services, Inc.**

**ARTICLE ONE**

The name of the Corporation is NAC Group Benefit Services, Inc..

**ARTICLE TWO**

The number of shares the corporation is authorized to issue is 10,000,000 with  
\$.10 par value.

**ARTICLE THREE**

The street address of the initial registered office of the corporation is 5700  
Memorial Highway, Suite 202, Tampa, FL 33615 and the registered agent is L. Paul  
Schmidt.


**ARTICLE FOUR**

The name and address of the incorporator is; L. Paul Schmidt, 1004 US Highway  
19, Suite 202, Holiday, FL 34691

**ARTICLE FIVE**

The mailing address of the initial principal office of the corporation is; 1004 US  
Highway, Suite 202, Holiday, FL 34691

IN WITNESS WHEREOF, the undersign has executed these Articles of  
Incorporation.

  
\_\_\_\_\_  
Signature of Incorporator

10/1/97  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION**

**REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provision 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:

*NAC Group Benefit Services, Inc.*

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

L. Paul Schmidt  
5700 Memorial Highway, Suite 202  
Hillsborough County, Tampa, FL 33615

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.

  
L. Paul Schmidt

10/1/97  
Date

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TALLAHASSEE, FLORIDA