# P97000093219

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

SUBJECT:

	(Proposed corp	porate name - must include su	ffix)	
		9	00002333 -10/29/970 ******70.00	1092 1112005 *****70.00
Enclosed is an original ar	nd one(1) copy of the artic	eles 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 CO	PPY REQUIRED	,
FROM:	RON A. DEGRAZ	CIA. (Printed or typed)		, .
	P.O. BOX 4455	Address	SECR TALL/	07
_	VERO BEACH, FL 32964  City, State & Zip			PILE
_	561-231-1376 Daytime	Telephone number	F STATI	

TAX ASSESSMENT XPERTS, INC.

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

### ARTICLES OF INCORPORATION

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

# ARTICLE I NAME

The name of the corporation shall be:

TAX ASSESSMENT XPERTS, INC.

# 97 OCT 29 AM II: 58 SECRETARY OF STATE TAIL ANASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 4455, 131 PARK SHORES CIRCLE - SUITE 14E VERO BEACH, FL 32964

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: FIFTEEN HUNDRED (1500)

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

RON A. DEGRAZIA 131 PARK SHORES CIRCLE - SUITE 14E VERO BEACH, FL 32963

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

RON A. DEGRAZIA P.O. BOX 4455 VERO BEACH, FL 32964

Signature/Incorporator 10/27/97
Date

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent Date