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TRANSMITTAL LETTER

FILED  
98 FEB 12 PM 2:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

500002428385--0  
-02/12/98--01020--015  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: LONMAY FINANCIAL SERVICES, 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: IAN GREIG  
Name (printed or typed)  
P.O. BOX 15862  
Address  
TAMPA, FL 33684  
City, State & Zip  
813-935-1583  
Daytime Telephone number

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

CB  
2/12/98

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF  
LONMAY FINANCIAL SERVICES, INC.

The undersigned subscriber to these Articles of Incorporation, a natural person, competent to contract, hereby forms 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:

LONMAY FINANCIAL SERVICES, INC.

The principal place of business of this Corporation shall be:

2701 West Waters Ave., #204, Tampa, FL 33614

ARTICLE II. NATURE OF BUSINESS

This Corporation may engage in, or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other State, Country, Territory or Nation. The specific purpose of this Corporation shall be tax preparation and related financial services.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any one time is 2000 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV. ADDRESS

The street address of the initial registered office of the Corporation shall be: 2701 W. Waters Ave., #204, Tampa, FL 33614. The name of the Registered Agent of the Corporation at that address is: IAN GREIG.

ARTICLE V. TERM OF EXISTENCE

This Corporation is to exist perpetually.

ARTICLE VI. DIRECTORS

This Corporation shall have one (1) Director initially. The names and street addresses of the initial members of the Board of Directors are:

<u>DIRECTOR</u>	<u>ADDRESS</u>
IAN GREIG	2701 W. Waters Ave., #204, Tampa, FL 33614

ARTICLE VII. OFFICERS

The names and addresses of the initial officers of the Corporation who shall hold office for the first year of the Corporation, or until their successors are elected or appointed are:

<u>OFFICER</u>	<u>ADDRESS</u>
IAN GREIG Pres./Sec./Treas.	2701 W. Waters Ave., #204, Tampa, FL 33614

ARTICLE VIII. SUBSCRIBE

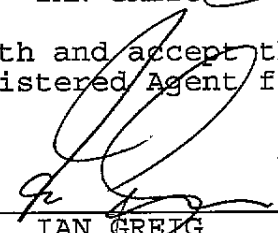
The name and street address of the subscribers to these Articles of Incorporation are:

<u>NAME</u>	<u>ADDRESS</u>	<u>SHARES OF COMMON STOCK ISSUED</u>
IAN GREIG	2701 W. Waters Ave., #204 Tampa, FL 33614.	2000

IN WITNESS WHEREOF, the undersigned have hereunto set their hands  
on this 9 day of February, 1998.

  
\_\_\_\_\_  
IAN GREIG (SIGNED)

I hereby am familiar with and accept the duties and  
responsibilities as Registered Agent for the said Corporation.

  
\_\_\_\_\_  
IAN GREIG (SIGNED)

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

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TALLAHASSEE, FL 32314

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: LONMAY FINANCIAL SERVICES, INC.

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

IAN S. GREIG

(NAME)

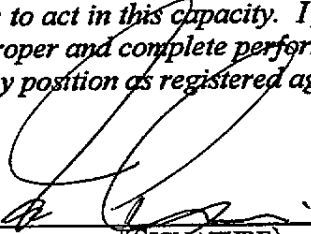
2701 WEST WATERS AVE.

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

TAMPA, FL 33614

(CITY/STATE/ZIP)

*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)

2/9/98  
(DATE)

**DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314**