

P98000016930

TRANSMITTAL LETTER

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

500002436095--5  
-02/20/98-01043-013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: John A. Sanchez, CPA, PA

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

\$78.75 Filing Fee & Certificate

FROM: John A. Sanchez  
2592 Scottville Avenue  
Deltona, Florida 32725  
(904) 801-1556

FILED  
98 FEB 20 AM 8:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BROCK FEB 23 1998

# 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: John A. Sanchez, CPA, PA

## ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:  
2592 Scottville Avenue  
Deltona, Florida 32725

## 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 Florida street address of the initial registered agent are:

John A. Sanchez  
2592 Scottville Avenue  
Deltona, Florida 32725

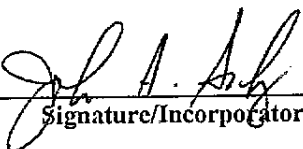
## ARTICLE V - INCORPORATOR

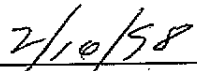
The name and address of the incorporator to these Articles of Incorporation are:

John A. Sanchez  
2592 Scottville Avenue  
Deltona, Florida 32725

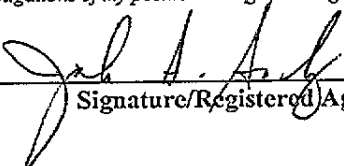
## ARTICLE VI - SPECIFIC PURPOSE

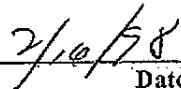
The corporation's specific purpose shall be to provide professional accounting, auditing, taxation, and consulting services.

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

*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

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TALLAHASSEE, FLORIDA