#### TRANSMITTAL LETTER

# Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: (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 \$122.50 \$131.25 Filing Fee\_ Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRED M. ANDRADES FROM: Name (Printed or typed) FL 33101-5793 City, State & Zip

B. BROCK OCT > 8 1998

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

Daytime Telephone number

(305) 738-6065 PGR.

#### 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
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The name of the corporation shall be:

QUICKBOOKKEEPERS, INC.

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ARTICLE	П	PRINCIPAL	<b>OFFICE</b>

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

4750 NW 7TH STREET

10 SUITE

MIAMI, FL 33143

ARTICLE III SHARES MAIL TOS

PO BOX 015793 MIAMI FL 31101-5793

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

*100* 

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

VICTOR M. ANDRADES

118 SIDONIA #2 CORAL GABLES, FL 33134

## INCORPORATOR

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

VICTOR M. ANDRADES

P.T. BOX

015793

MIAMI, A 33/01

(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