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

900002916779 -06/28/99--01058--010 *****78.75 *****78.75

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

\$70.00 Filing Fee

Filing Fee & Certificate

\$122.50

\$131.25

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

9833 WESTVIEW DR

954-752-4641

Daytime Telephone number

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming 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:

F. TAXMAN. Inc.

99 JUN 28 PH 4: 13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

9833 West View DR #837

CORAL SpRINGS, FL 33076.2537

ARTICLE III SHARES

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

10.000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Jeffrey A. Schnerner 9833 Westview DR #837 Corac Springs, H 33076-2537

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Jeffrey A. Schneider 9833 Westview DR #837 Coral Springs, Fr 33076-2537

The undersigned incorporator(s) has(have) executed these Articles of Incorporation th
24 day of June , 1999.
(An additional article must be added if an effective date is requested.)
Ahread !
Signature
Signature
Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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 FL TAX MAD, Inc.		·
2.	The name and address of the registered agent and office is:		
	JEFFREY A. Schneide.	SECRE SECRE	
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	TARY UF ASSEE F	Charles Charles
	CORAL SPRINGS, FL 33076-2537	₩ 13 STATE LORIDA	

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.