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PAUL E. WHELAN  
6810 WHITE OAK DRIVE  
MIAMI LAKES, FLORIDA 33014  
(305) 822-0451

October 1, 1999

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-10/04/99--01105--003  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Department of State  
Division of Corporations  
409 EAST GAINES ST  
Tallahassee, Florida 32399  
TEL (850) 487-6052

SUBJECT: PAUL E. WHELAN, CERTIFIED PUBLIC ACCOUNTANT, P.A.

Enclosed is an original and (1) copy of the articles of incorporation and a check for \$78.75 for the filing fee and certified copy.

FROM:

PAUL E. WHELAN  
6810 WHITE OAK DRIVE  
MIAMI LAKES, FLORIDA 33014  
(305) 822-0451

FILED  
99 OCT 4 PM 4:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10-5  
WC

## 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:

PAUL E. WHELAN, CERTIFIED PUBLIC ACCOUNTANT, P.A.

### ARTICLE II      PRINCIPAL OFFICE

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

6810 WHITE OAK DRIVE  
MIAMI LAKES, FLORIDA 33014

### ARTICLE III      SHARES

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

ONE THOUSAND (1000)

### ARTICLE IV      INITIAL REGISTERED AGENT

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

PAUL E. WHELAN  
6810 WHITE OAK DRIVE  
MIAMI LAKES, FLORIDA 33014

### ARTICLE V      INCORPORATOR

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

PAUL E. WHELAN  
6810 WHITE OAK DRIVE  
MIAMI LAKES, FLORIDA 33014

Paul E. Whelan  
Signature/Incorporator

10/1/99  
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 that capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete function of my duties, and I am familiar with and accept the obligations of my position as resident agent

Paul E. Whelan  
Signature/Registered Agent

10/1/99  
Date

FILED  
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TALLAHASSEE, FLORIDA  
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