

711000092967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

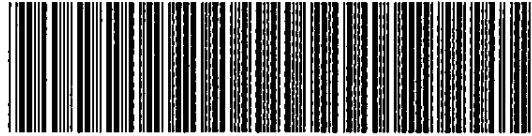
(Business Entity Name)

(Document Number)

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2011 OCT 24 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers OCT 25 2011

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

SUBJECT: BLM Consulting, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Arthur Marubbio

Name (Printed or typed)

945 Arbormoor Place

Address

Lake Mary, FL 32746

City, State & Zip

321 527-8754

Daytime Telephone number

amarubbio@yahoo.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME BLM Consultants, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
945 Arbormoor Place
Lake Mary, Florida ~~32746~~
32746

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To provide consulting services and expertise in support of marketing, business development and proposal development in accordance with customer needs/requirements.

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Arthur Marubbio, President
Address: 945 Arbormoor Place
Lake Mary, Fl 32746

Name and Title: Beverly Marubbio, Vice President
Address: 945 Arbormoor Place
Lake Mary, Fl 32746

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Richard A. Wollner, CPA PA
Address: 1008 Woodall Drive
Altamonte Springs Fl 32714

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Richard A. Wollner, CPA PA
Address: 1008 Woodall Drive
Altamonte Springs, Fl 32714

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Richard A. Wollner
Required Signature/Registered Agent

10/13/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Richard A. Wollner
Required Signature/Incorporator

10/13/11
Date

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