

## TRANSMITTAL LETTER

P00000012122

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

3000003116938--5  
--01/31/00--01137--013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Peritus Consulting, INC.  
(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  
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: Arlene Maya  
Name (Printed or typed)  
426 Poinciana IS  
Address  
NMB, FL 33160  
City, State & Zip  
954-845-0166  
Daytime Telephone number

FILED  
00 JAN 31 PM 1:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

T. Burch FEB 3 2000

# 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:

Peritus Consulting, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

1041 NW 125 AVE

SUNRISE, FL 33323

## ARTICLE III SHARES

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

300 Shares

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

DAVID TACHER

1041 NW 125 AVE

SUNRISE, FL 33323

## ARTICLE V INCORPORATOR

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

ARLENE MAYA

426 POINCIANA IS.

NMB, FL, 33160

Arlene Maya

Signature/Incorporator

1-24-00

Date

(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

David Tacher

Signature/Registered Agent

1/24/00

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 JAN 31 PM 1:18

FILED