

P00000024037

TRANSMITTAL LETTER

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

4000003141654--4
-02/21/00--01113--014
*****78.75 *****78.75

SUBJECT: AMERICAN CONSULTANTS, INC.
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: JAY GOLDFARB
Name (printed or typed)

5125 CASTELLO DR.
Address

NAPLES, FL 34103
City, State & Zip

(941) 434-8800
Daytime Telephone number

FILED
00 MAR -8 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W-5101

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



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 24, 2000

JAY GOLDFARB
5125 CASTELLO DR.
NAPLES, FL 34103

SUBJECT: AMERICAN CONSULTANTS, INC.
Ref. Number: W00000005101

We have received your document for AMERICAN CONSULTANTS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6929.

Shannon Thompson
Document Specialist

Letter Number: 000A00010045

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:

Consultants of America, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

Miller and Associates, 5125 Castello Dr., Naples, FL 34103

ARTICLE III SHARES

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

Five Thousand (5,000) shares - no par common value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jay Goldfarb, 5125 Castello Dr., Naples, FL 34103

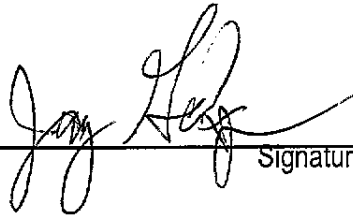
ARTICLE V INCORPORATORS)

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

JAY GOLDFARB, President/Secretary
4250 Galt Ocean Dr., #9B
Ft. Lauderdale, FL 33308-6138

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st _____ day of March _____ '2000 .



Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 61 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: CONSULTANTS OFF AMERICA, INC.

2. The name and address of the registered agent and office is:

JAY GOLDFARB

(Name)

5125 CASTELLO DR.,

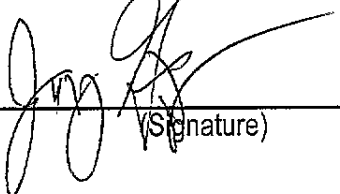
(P.O. Box not acceptable)

NAPLES, FL 34103

(City/State/Zip)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, / Me appoin&nt as registered agent and agree to act in Mis capacity. IfurMeragree to with the provisions of all statutes relating to the proper and complete perform&my duties, and / am familiar with and accept the obligations of my position as registered agent



(Signature)

3/1/2000

(Date)