MODODA 7355 TRANSMITTAL LETTER

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ALLAHASSEE, FLORIDA

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

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SUBJECT: COM	PREHENSIVE CONSULTING (Proposed corpo	SERVICES, INC.	fix)	
Enclosed is an origina \$70.00 Filing Fee	al and one (1) copy of the artic \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	···
	,	ADDITIONAL CO	PY REQUIRED	
FROM: AMELIA ROSE Name (Printed or typed)				
1011 Green Pine Blvd., Suite F-2 Address				
	West Palm Beach, F.	lorida 33409 , State & Zip	· · ·	g, samula
amelia Losa	•	Telephone number		ੇ ਜੋ ਸ਼ੌਵਿੰ,
CORRECT OF, TILL DATE 3/9/00	SAVE NOTE: Please provide the o	original and one copy o	f the articles.	
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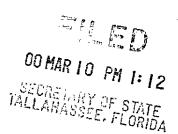
ARTICLES OF INCORPORATION

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

ARTICLE 1 NAME

The name of the corporation shall be:

COMPREHENSIVE CONSULTING SERVICES, INC



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1011 Green Pine Blvd., Apt F-2

West Palm Beach, FL 33409

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting services and training

ARTICLE IV SHARES

The number of shares of stock is:

Ten

ARTICLE V INITIAL OFFICERS DIRECTORS

The name(s) and address(es):

Amelia Rose

1011 Green Pine Blvd. F-2 West Palm Beach, FL 33409

ARTICIE VI RECISTERED AGE

The name and Florida street address registered agent are:

Amelia Rose

1011 Green Pine Blvd., F-2

West Palm Beach, FL 33409

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Amelia Rose

1011 Green Pine Blvd., F-2

West-Palm-Beach-Fi-33409

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.

Signature/Registered Agent

Signature/Incorporator

Date

2000

Date