## POOOOOO3338

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

700003411957--1 -10/02/00--01135--001 \*\*\*\*\*70.00 \*\*\*\*\*\*70.00

<del></del> -	(PROPOSED CORPORAL	E NAME - MUST INCLU	DE SUFFIX		
` <b>`</b>					- ~= N
Enclosed is an original	I and one(1) copy of the article	s of incorporation and a	check for:	7	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REOUIRED		
FROM:	;	EATON inted or typed)		J	
	6203 (	D. Gun Cl Address	•		
	W. PALM City,	BEACH, F	L, 33415 Z		
	<u>561-615-</u> Daytime T	0272 elephone number	ECRETARY OF STATE LAHASSEE, FLORIDA	00 0CT -2 PM 1:52	

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

1) 10 4

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 62	1 FS (Profit)		
ARTICLE I NAME  The name of the corporation shall be:	_	CONSULTANT	TENG.
Til.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:	6203	W. Gun CL	us Ro
" .		PALM BEACH	
ARTICLE III PURPOSE	die∙ <del>∵</del> ∤		-
The purpose for which the corporation is organized acquire, own, control, + t permitted under the lews of	Ransact	any and all	activities
ADTICLE IV SHARES			A.
The number of shares of stock is:	to sha	res (a) par	value of 1.00
ARTICLE V INITIAL OFFICERS DIRECT	CTORS (opti	ional)	
SHARON EATON			
6203 W. Gun Club		·	OC TAL
W. PAIN BEACH, Fl. 3	3415		1,00C1 1,00C1
ARTICLE VI REGISTERED AGENT The name and Florida street address of the regis	tered agent is:		ST N
SHARON EATON	0.	·	FO P I
6203 W. Gun Club W. PALM BEACH. F	; KD. =2 3341		) 1: 52 ORID.
ARTICLE VII INCORPORATOR 1	·		∑ <sub>El</sub> ⊘
The <u>name and address</u> of the Incorporator is:			
SHARON EATON 6203 W. Gun CL	is Rd.		
1 Day Geart	FL 33	3415	منة عله
**************************************	************ Forocess for the a	**************************************	
certificate, I am familiar with and accept the appointment a	s registered agen	t and agree to act in this capac	city
Ahar SAn		9-	28-00
Signature/Registered Agent		Date	•

Signature/Incorporator

\*\*

9-28-00

Date