

TRANSMITTAL LETTER

PO100003803L

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

700003962827--9
-04/06/01--01064--023
*****87.50 *****87.50

SUBJECT: EXPERT WITNESS 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: DAVID M. KING
Name (Printed or typed)

126 MEETING STREET DRIVE
Address

TALLAHASSEE, FL 32301
City, State & Zip

(850) 878-7096
Daytime Telephone number

FILED
01 APR 16 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

G. BULLOCK APR 16 2001

W01-8164 (3)



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 11, 2001

DAVID M KING
126 MEETING STREET DRIVE
TALLAHASSEE, FL 32301

SUBJECT: EXPERT WITNESS CONSULTING INC.
Ref. Number: W01000008164

We have received your document for EXPERT WITNESS CONSULTING INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

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) 487-6926.

Gina Bullock
Document Specialist
New Filing Section

Letter Number: 901A00021477

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

EXPERT WITNESS CONSULTING INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

126 MEETING STREET DRIVE
TALLAHASSEE, FL 32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE EXPERT WITNESS CONSULTING TO ATTORNEY'S AND INSURANCE CO.

ARTICLE IV SHARES

The number of shares of stock is:

~~NONE (0)~~ ONE (1)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

DAVID M. KING
126 MEETING STREET DRIVE
TALLAHASSEE, FL 32301

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

DAVID M. KING
126 MEETING STREET DRIVE
TALLAHASSEE, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DAVID M. KING
126 MEETING STREET DRIVE
TALLAHASSEE, FL 32301

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

David M. King
Signature/Registered Agent

Date

04/04/01

David M. King
Signature/Incorporator

Date

04/04/01

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