

TRANSMITTAL LETTER

**P01000043055**

APPROVED  
AND  
FILED

01 APR 30 AM 11:52

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: AB Consulting INC  
(Proposed corporate name - must include suffix)

900004091149--8  
-04/30/01--01024--019  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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: Alvin Abblunt  
Name (Printed or typed)

13653 PICAISIA DR.  
Address

JACKSONVILLE FL  
City, State & Zip

(904) 221-6510  
Daytime Telephone number

RECEIVED  
01 APR 30 AM 11:46  
DIVISION OF CORPORATION

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

*4/30*

**ARTICLES OF INCORPORATION  
OF**

**AB CONSULTING, INC.**

**ARTICLE I. NAME**

The name of the corporation shall be:  
**AB CONSULTING, INC.**

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**ARTICLE II. PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:  
**13653 Picarsa Drive  
Jacksonville, Florida 32225**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III. INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is:  
**Alvin A. Blount  
13653 Picarsa Drive  
Jacksonville, Florida 32225**

**ARTICLE IV INCORPORATORS**

The name and street address of the incorporator to these Articles of Incorporation is:  
**Alvin A. Blount**

The undersigned has executed these Articles of Incorporation this

**30 day of April, 2001**

Alvin A. Blount

Incorporator

April 30, 2001

Date

**CERTIFICATION OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the law 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 AB CONSULTING, INC.
2. The name and address of the registered agent and office is:

**Alvin A. Blount**  
**13653 Picarsa Drive**  
**Jacksonville, Florida 32225**

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 APPOINT 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE Alvin A. Blount  
DATE April 30, 2001

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