P01000050319

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



SUBJECT:	Cellular Consultants, 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	Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	Name (F	Paner Printed or typed) 51 Aog Address	00004274! -05/21/010 ******87.50	5153 1086023 *****87.50	:
	HAUANA	►1. 323 <u>3</u> , State & Zip	3		:
	SSO - S	39-7283		,	

 $\label{eq:NOTE:Please provide the original and one copy of the articles.}$

A3/2/W

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	APPRO ANC FILE	VED D
ARTICLE I NAME The name of the corporation shall be:	OI MAY 21	- PM 2:30
Cellular Consultants, Inc	SECRETARY (OF STATE FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:		
IIA E 5th AOE HAVANA. H. 32333 ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
ARTICLE IV SHARES The number of shares of stock is:	- , .	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): Duana & Palmer President / T Angela & Haper Vice President	reasue dent/s	ecretary
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: 112 E STADES HAVRING FL 32333		·
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Duana E Done II 2 E Std AUE HAUANA F - 32333 ********************************	******	******
Having been named as registered agent to accept service of process for the above stated contributes, I am familiar with and accept the appointment as registered agent and agree to	orporation at the pi	lace designated in this
Signature/Registered Agent	$\frac{5/2}{\text{Date}}$	1/0/
	<u> </u>	1

Signature/Incorporator