01 JUL 12 AM 8: 56

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

SECR. STATE TALLAHASSEE, FLORIDA

SUBJECT:

H L H CONSULTANTS, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300004471133------07/12/01--01039--009 *****78.75 ******78.75

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

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Herbert Hardbrod

Name (Printed or typed)

6682 Bali Hai Drive

Address

Boynton Beach, FL 33437

City, State & Zip

561 740-1660

Daytime Telephone number

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

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:	FILED	,
H L H CONSULTANTS, Inc.	01 JUL 12 AH 8: 56	
in the second desired by the second s	SECHE TALLAHASSEE, FLORIDA	
ARTICLE II PRINCIPAL OFFICE	(MEDALING CRIMA)	i
The principal place of business/mailing address is:		:
PO Box 740251 Boynton Beach, FL 33474		
ARTICLE III PURPOSE		-
The purpose for which the corporation is organized is:		:
For Profit	·	ş
ARTICLE IV SHARES		
The number of shares of stock is:	· · · · · · · · · · · · · · · · · · ·	
1000 shares	·	÷ .
ARTICLE V INITIAL OFFICERS DIRECTORS (optional)	1	
The name(s) and address(es):		
	Boynton Beach, FL 33437	
Janet S. Hardbrod Secy 6682 Bali Hai Dr.	Boynton Beach, FL 33437	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	The second secon	
Herbert L. Hardbrod 6682 Bali Hai Dr. Boynton	Beach, FL 33437	
ADDICI E VII INCORDORATOR	t e e	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:		
77	Decale By 00405	
Boylicon	Beach, FL 33437	
*******************	*************	
Having been named as registered agent to accept service of process for the above state certificate, I am familial with and accept the appointment as registered agent and agre	ed corneration at the place designated in this	
(III and III and accept the appointment as registered agent and agre	e to act in this capacity	
Signature	1/9/01	
Signature/Registered Agent Herbert L. Hardbrod	Date	
MARILON	7/9/01	
Signature/incorporator Herbert L. Hardbrod	Date	