

# PO1000078876

## TRANSMITTAL LETTER

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

SUBJECT: Blue Dolphin Consulting, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

000004519630--0  
-08/06/01--01102--020  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed are 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: Christine Clayton  
Name (Printed or typed)

2704 2nd Street #2  
Address

Indian Rocks Beach FL 33785  
City, State & Zip

727-804-4399  
Daytime Telephone number

01 AUG -6 PM 1:09  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

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

2-  
Done  
8/10/01

**ARTICLES OF INCORPORATION**

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

**FILED**

01 AUG -6 PM 1:09

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Blue Dolphin Consulting, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2704 2nd Street #2  
Indian Rocks Beach FL 33785

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Professional Corporation

**ARTICLE IV SHARES**

The number of shares of stock is:

50

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

**ARTICLE VI REGISTERED AGENT**

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

Christine Clayton  
2704 2nd Street #2  
Indian Rocks Beach, FL 33785

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Christine Clayton  
2704 2nd Street #2  
Indian Rocks Beach, FL 33785

\*\*\*\*\*  
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

Christine Clayton

Signature/Registered Agent

8/2/01

Date

Christine Clayton

Signature/Incorporator

8/2/01

Date