POI OMEASSUITIAL LEFTER 5

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

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SUBJECT: GARFIELD CONSULTING, INC.

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	S78.75 Filing Fee & Certified Copy ADDITIONAL COR	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	KEITH E	Do wws Printed or typed)	
	7138 MILL	RUN CIRC	LE
	NAPLES	FLORIDA State & Zip	34/09/ASS
	941-564	•	22 PM 77/RY OF ASSEE P
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NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED			
ARTICLE I NAME The name of the corporation shall be:	01 AUG 22 PM 1: 26 SECRETARY OF STATE			
GARFIELD CONSULTING, INC.	TALLAHASSEE FLORIDA			
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: P. O. BOX 12313, NAPLES, 7L	34161			
ARTICLE III PURPOSE The purpose for which the corporation is organized is:				
TECHNICAL CONSULTING SERVICE	5			
ARTICLE IV SHARES The number of shares of stock is:				
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):				
KEITH E. DOWNS, PRESIDEN 7138 MILL RUN CIRCLE NAPLES, 7L 34109	7			
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:				
KEITH E. DOWNS 7/38 MILL RUN CIRCLE NAPLES, 7L 34109 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: KEITH E. DOWNS 7/38 MILL RUN CIRCLE NAPLES ************************************				
***************	**********			

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this

KEITH E. DOWNS

8/20/01 Date 8/20/01

certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator