Division of Corporations

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : INCORPORATETIME.COM, INC.

Account Number : 119990000221

Phone : (631)224-9004

Fax Number

: (631)224-7979

FLORIDA PROFIT CORPORATION OR P.A.

Appleseed Consulting, Inc.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$70.00 |

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SECRETARY OF STATE TALLAHASSEE FLORIDA

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AKTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATION FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE ! -NAME

THE NAME OF THE CORPORATION SHALL BE:

Appleaced Consulting, Inc.

ARTICLE II -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

3003 Sprawling Oaks place Vairico FL, 33594

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have at any one time is:

2,000 shares at \$.01 per value

ARTICLE IV -INITIAL OFFICERS/DIRECTORS:

President/Secretary/Director: Deborah K. Chapman 3003 Sprawling Caks Place.
Valvico FL, 33584
Vice President/Treasurer/Director: John R. Chapman 3003 Sprawling Caks
Place Valvico FL, 33594

ARTICLE V -INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

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SECRETARY OF STATE TALLAHASSEE FLORIDA

J0hh) Deborah K: Chapman 3003 Sprawling Oaks Place Vakico FL, 33594

ARTICLE VI-INCORPORATOR:

The name and address of the incorporator to these Articles of Incorporation are

Kerry Walsh 35Carleton Avenue Islip Terrsco, NY 11752

Kerry Walsh, Incorporator

11101

Itaving been named registered agent and to accept service of process for the above stated corporation as the place designated in this certificate I hereby accept the appointment 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 obligations of my position as registered agent.

Beborah K. Chopman, Registered Agent

RChapman

Date

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