POQO CO O O TRANSMITTAL LETTER / / JQQ447

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

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SUBJECT: OK	Consulting Agency, Inc. (PROPOSED CORPORA)	FE NAME - MUST INCLI	IDE SUFFIX)		-
	·				
Enclosed are an orig	inal and one (1) copy of the arti	cies of incorporation and	i a check for.	7	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	of	
FROM:	D. Lawrence Howard, P.A	A. (Printed or typed)			
	1506 Prudential Drive, Suite 209			-	
	Address			2 8	
	Jacksonville, Florida 32207			02 0CT	71
	City, State & Zip			元	
	(904) 396-9963			2	
	Daytime 1	Celephone number	ĽORIDJ	PM 4: 08	

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)

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

OK Consulting Agency, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1506 Prudential Drive, Jacksonville, Fl 32207

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting

ARTICLE IV SHARES

The number of shares of stock is:

1,000

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:

D. Lawrence Howard 1506 Prudential Drive, Suite 209 Jacksonville, FI 32207

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Evelyn D. Lee 1506 Prudential Drive Jacksonville, FI 32207

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

Signature/Registered Agent

Signature/Incorporator

Date

Date 10-00

Date