

P02000131401 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

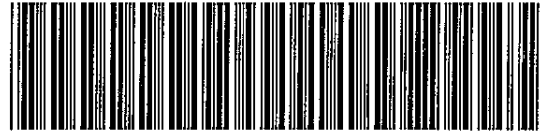
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000009382660

12/13/02--01031--001 **87.50

7
8
9
10
11
12

02 DEC 13 14:10:36

SECRET
TALLAHASSEE
FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: ABL CONSULTING, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: ALEJANDRA B LEAL
Name (Printed or typed)

16051 BLATT BLVD APT 109
Address

WESTON, FL 33326
City, State & Zip

(954)349-0401
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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

ABL CONSULTING INC.

02 DEC 13 AM 10:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

16051 BLATT BLVD APT 109
WESTON, FL 33326

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ADMINISTRATIVE ADVISING AND CONSULTING

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ALEJANDRA B LEAL
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

ALEJANDRA B LEAL
16051 BLATT BLVD
WESTON, FL 33326

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALEJANDRA B LEAL
16051 BLATT BLVD APT 109
WESTON, FL 33326

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

11-21-2002

Date



Signature/Incorporator

11-21-02

Date