

P03000012289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

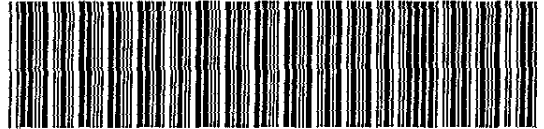
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03 JAN 27 AM 10:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02/12

**TRANSMITTAL LETTER**

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

**SUBJECT:** The 10193 Consulting Group, 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:** Michael A. Chuparkoff, Esq.  
Name (Printed or typed)

5910 Landerbrook Drive, Suite 200  
Address

Cleveland, Ohio 44124  
City, State & Zip

440-446-1100, Ext. 104  
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)

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TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

The 10193 Consulting Group, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

10193 Ginger Point Court  
Bonita Springs, FL 34135

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide financial, insurance and/or consulting products and services

**ARTICLE IV SHARES**

The number of shares of stock is:

One Thousand (1,000) Common, No Par Value

**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:

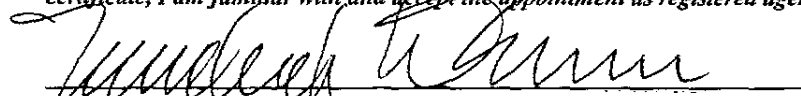
Frederick A. Eisner  
10193 Ginger Point Court  
Bonita Springs, FL 34135

**ARTICLE VII INCORPORATOR**

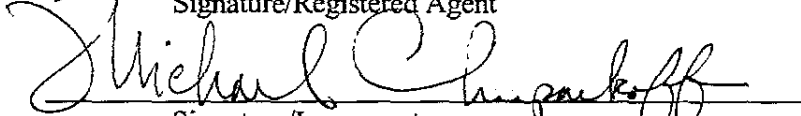
The name and address of the Incorporator is:

Michael A. Chuparkoff, Esq. (#0131253)  
5910 Landerbrook Drive, Suite 200  
Cleveland, OH 44124

\*\*\*\*\*  
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

1/27/03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

1-23-03  
\_\_\_\_\_  
Date