

P0300005923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

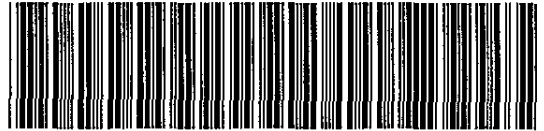
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J Kane GAVE
AUTHORIZATION BY PHONE TO
CORRECT Name
DATE 5-30-03
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05/19/03--01064--027 **78.75

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03 MAY 19 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RV
5/31

TRANSMITTAL LETTER

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

SUBJECT: KANE ASSOCIATES, 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: THOMAS E. KANE
Name (Printed or typed)

5319 HUNTINGWOOD CT.
Address

SARASOTA, FL 34235
City, State & Zip

941-376-3366
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)

ARTICLE I NAME

The name of the corporation shall be:

KANE CONSULTING, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

*5319 HUNTINGWOOD Ct.
SARASOTA, FL 34235*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*MARKETING AND MANAGEMENT CONSULTING
to PROFESSIONAL FIRMS AND OTHERS.*

ARTICLE IV SHARES

The number of shares of stock is:

ONE (1)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

*THOMAS E. KANE, President
5319 HUNTINGWOOD Ct.
SARASOTA, FL 34235*

ARTICLE VI REGISTERED AGENT

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

*THOMAS E. KANE
5319 HUNTINGWOOD Ct
SARASOTA, FL 34235*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*THOMAS E. KANE
5319 HUNTINGWOOD Ct
SARASOTA, FL 34235*

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]

Signature/Registered Agent

5/15/03

Date

[Signature]

Signature/Incorporator

5/15/03

Date

FILED
03 MAY 19 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA