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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

nc 6/16

TRANSMITTAL LÉTTER

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

SUBJECT: PB	DAVIS CONSULTING, INC.				
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCLU</u>	IDE SUFFIX)		
Enclosed are an origi	nal and one (1) copy of the arti	cles of incorporation and	a check for:		
□ \$70.00	፟፟፟፟፟፟፟፞፞ቖ \$78.75	□ \$78.75	3 \$87.50		
Filing Fee	•	Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of		
			Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:	DAVID P PECHAWER	- CPA			
ricom	Name (Printed or typed)				
401 LUDINGTON STREET Address					
ESCANABA, MI 49829					
City, State & Zip					
(906) 786-6151					
Daytime Telephone number					

NOTE: Please provide the original and one copy of the articles.

FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

03 JUN 12 AM 9: 05

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

PB DAVIS CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1500 S. OCEAN BLVD. - APT 1203 POMPANO BEACH, FL 33062

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SECURITY CONSULTING

ARTICLE IV SHARES

The number of shares of stock is:

1000

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:

PETER DAVIS 1500 S OCEAN BLVD. - APT 1203 POMPANO BEACH, FL 33062

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PETER DAVIS 1500 S OCEAN BLVD. - APT 1203 POMPANG BEACH, FL 33062

Pete Davis	5123103
Signature/Registered Agent	Date
Peter Davis	5/23/03
Signature/Incorporator	Date