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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

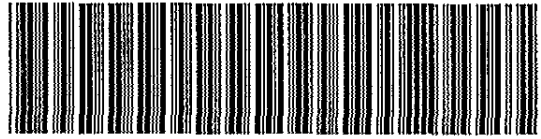
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 NOV 17 AM 10:27

TRANSMITTAL LETTER

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

SUBJECT: Kelley Management 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Kelley Management Consulting Group, Inc.
Name (Printed or typed)

2749 Cullens Court
Address

Ocoee, FL 34761
City, State & Zip

407-291-8686
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:

Kelley Management Consulting Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Place of Business: 2749 Cullents Court, Ocoee, FL 34761

Mailing Address: Postal Box 386, Ocoee, FL 34761

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Management Consulting, training and workplace mediation

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Dr. Frann Kelley Rodriguez
2749 Cullens Court
Ocoee, FL 34761

ARTICLE VI REGISTERED AGENT

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

Dr. Frann Kelley Rodriguez
2749 Cullens Court
Ocoee, FL 34761

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. Frann Kelley Rodriguez
2749 Cullens Court
Ocoee, FL 34761

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

Dr. Frann Kelley Rodriguez
Signature/Registered Agent

11/14/03
Date

Dr. Frann Kelley Rodriguez
Signature/Incorporator

11/14/03
Date

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