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(Business Entity Name)

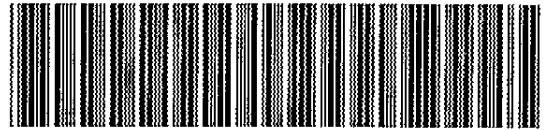
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TALLAHASSEE, FLORIDA

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2012/13A

TRANSMITTAL LETTER

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

SUBJECT: AO Consulting Services, Inc.

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: Alfred Odachowski
Name (Printed or typed)

4303 Place Le Manes
Address

Lutz, Florida, 33558
City, State & Zip

813-948-8227
Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

AO Consulting Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4303 Place Le Manes
Lutz, Florida, 33558

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Conduct business related to the provision of advice and counsel regarding the management of Information Technologies, its infrastructure, organization, and relationships and other aspects of IT, as well as:

Transact any lawful business for which corporations may be incorporated under Florida Law.

ARTICLE IV SHARES

The number of shares of stock is:

The aggregate number of shares of stock authorized to be issued by this corporation shall be 1000 shares of common stock, each with a par value of One Dollar. Each share of issued and outstanding common stock shall entitle the holder thereof to one vote on each matter with respect to which shareholders have the right to vote, to fully participate in all shareholder meetings, and to share ratably in the net assets of the corporation upon liquidation or dissolution.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

The Corporation shall have two directors initially, whose names and address are:

<u>Name</u>	<u>Title</u>	<u>Address</u>
Alfred Odachowski	President	4303 Place Le Manes, Lutz, Florida 33558
Carol Ann Odachowski	Vice-President	4303 Place Le Manes, Lutz, Florida 33558

The number of directors may be increased or diminished from time to time in accordance with the provisions of the corporation's by-laws, but shall never be less than one.

ARTICLE VI REGISTERED AGENT

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


Alfred Odachowski
4303 Place Le Manes
Lutz, Florida 33558

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Carol Ann Odachowski
4303 Place Le Manes
Lutz, Florida 33558

Having been named as registered agent and 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.


Alfred Odachowski
Signature/Registered Agent


Date


Carol Ann Odachowski
Signature/Incorporator


Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA