

PO4000 103719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

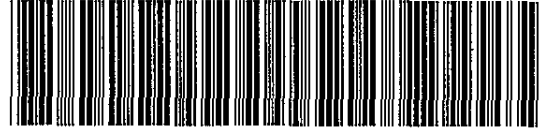
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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TSO/13/04

**TRANSMITTAL LETTER**

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

**SUBJECT:** ZAIRES CONSULTING CORPORATION  
(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
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** DIANA A. LETRELLE C/O ZAIRES CONSULTING  
Name (Printed or typed)

6001 ARGYLE FOREST BLVD. STE. 21 #303  
Address

JACKSONVILLE, FLORIDA 32244  
City, State & Zip

904-693-0911  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

**ZAIRES CONSULTING CORPORATION**

**A Corporation Organized Under The Laws of the**

STATE OF  
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:

ZAIRES CONSULTING CORPORATION

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

6001 ARGYLE FOREST BLVD. STE 21 #303  
JACKSONVILLE, FL 32244

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
FOR PROFIT

**ARTICLE IV SHARES**

The number of shares of stock is:

50,000 @ 1.00 PAR VALUE

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

DIANA LETRELLE, PRES. BUSINESS OPERATIONS

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

DIANA LETRELLE  
6001 ARGYLE FOREST BLVD. STE 21 #303  
JACKSONVILLE, FL 32244

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

DIANA LETRELLE  
6001 ARGYLE FOREST BLVD. STE 21 #303  
JACKSONVILLE, FL 32244

\*\*\*\*\*

*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*

*Diana Letrelle*  
Signature/Registered Agent

7-5-04  
Date

*Diana Letrelle*  
Signature/Incorporator

7-5-04  
Date