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TRANSMITTAL LETTER

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

UBJECT:	•	Capitol City Consulting Group, Inc.			
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
nclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l 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		
		ADDITIONAL COPY REQUIRED			
FROM:		ichard Kolodgy			
	Nam	e (Printed or typed)			
-	2209 Paul Russell Circle				
		Address			
	Tallahassee, FL 32301				
	City	y, State & Zip			
	850-284-1952				
	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:

Capitol City Consulting Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 2209 Paul Russell Circle Tallahassee, FL 32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Political consulting and lobbying.

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):

Richard Kolodgy, President Diane Kolodgy, Vice President

ARTICLE VI REGISTERED AGENT

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

Richard Kolodgy 2209 Paul Russell Circle Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the <u>Incorporator</u> is:

Richard Kolodgy 2209 Paul Russell Circle Tallahassee, FL 32301

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/Registered Agent

Signature/Incorporator

8/8/65 Date

[10]