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COVER LETTER

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

SUBJECT:	Apex Consul			
	(PROPOSED CORPORA	TE NAME - MUST INCL	<u>uđe Suffix</u>)	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:	
ر ن ر ن ر ن ن ر ن ن ن ن ن ن ن ن ن ن ن ن	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM: SAMUEL DLIVER Name (Printed or typed) 1. D. By 366 Address				
TAZLA HASSEE, FL 32302 City, State & Zip				
850.562 - 7115 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: APEX CONSULTING SERVICES, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: P.O. Box 366 TALLAMASSEE, FL 32302 ARTICLE III PURPOSE The purpose for which the corporation is organized is: GENERAL CONSULTING (GOVERNMENT) ARTICLE IV SHARES The number of shares of stock is: (1) ONE ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): SAMUEL DLIVER (PRESIDENT) A.D. Bay 366 TAWAHASSEE, FL 32302 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: SOMUEL DLIVER 5743 FOX BRIDGE WAY TAUAHASSEE, FL 32317 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Strewel DLIVER BOX 366 TAZLAHASSEE, FL 32302

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this

Mar. 15, 2006 Date Mar. 15, 2006

certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Incorporator