

PO6000055082

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

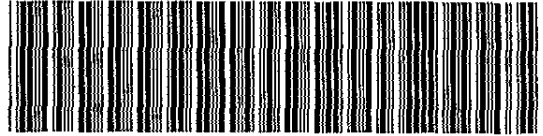
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CLERK OF STATE  
TALLAHASSEE FLORIDA

COVER LETTER

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

SUBJECT: QUANTUM PEAK CONSULTING, 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

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: Bryan G. McGuire  
Name (Printed or typed)

333 4th AVENUE NORTH  
Address

ST. PETERSBURG FL 33701  
City, State & Zip

727-822-8456 / 727-409-2782  
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:

QUANTUM PEAK CONSULTING, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

333 4th AVENUE NORTH  
ST. PETERSBURG, FL 33701

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUSINESS CONSULTING

## 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):

BRYAN G. MCGUIRE - PRESIDENT, TREASURER, SECRETARY

## ARTICLE VI REGISTERED AGENT

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

BRYAN G. MCGUIRE  
333 4th AVENUE NORTH  
ST. PETERSBURG, FL 33701

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

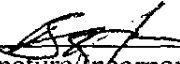
BRYAN G. MCGUIRE  
333 4th AVENUE NORTH  
ST. PETERSBURG, FL 33701

\*\*\*\*\*

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

4/12/06  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

4/12/06  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA