

PO6000055884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

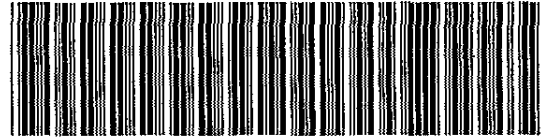
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2006 APR 19 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Hampton APR 19 2006

COVER LETTER

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

SUBJECT: Delri 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: Monique M. MacDonald

Name (Printed or typed)

1363 Cadhay Ct

Address

Safety Harbor, FL 34695

City, State & Zip

727-366-7857

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Delri Consulting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1363 Cadhay Ct.
Safety Harbor, FL 34695

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any purpose allowed pursuant to the Florida Corporation Business Act.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares @ \$1.00 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Monique M. MacDonald
1363 Cadhay Ct.
Safety Harbor, FL 34695
Director, President, Vice President, Treasurer, and Secretary

ARTICLE VI REGISTERED AGENT

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

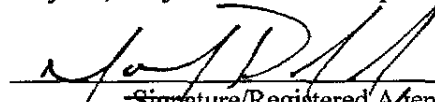
Monique M. MacDonald
1363 Cadhay Ct.
Safety Harbor, FL 34695

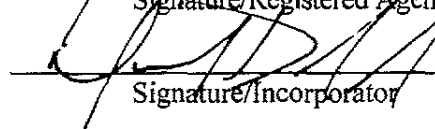
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Monique M. MacDonald
1363 Cadhay Ct.
Safety Harbor, FL 34695

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

3/20/06

Date
3/20/06

Date