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TALLAHASSEE - STATE

Cd. 9-25

COVER LETTER

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

SUBJECT:	KB Consulting Co. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Timelessed and an exis					
\$70.00 Filing Fee	ginal and one (1) copy of the artic \$\int\\$.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM: Kimberly S. Bryan Name (Printed or typed) 11670 Thornapple Dr. Address					
		FL 32223 State & Zip 87-4675 elephone number	<u></u>		

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



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

September 13, 2007

KIMBERLY S. BRYAN 11670 THORNAPPLE DR. JACKSONVILLE, FL 32223

SUBJECT: K B CONSULTING CO. 1 Packsomille Ref. Number: W07000045363

KB Consulting Services of Jackson ville

We have received your document for K B CONSULTING CO. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis **Document Specialist New Filing Section**

Letter Number: 907A00054294

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
The name of the corporation shall be: KB Consulting Co. of Jackson villa	ے
The principal place of business/mailing address is: 11670 Thornapple Dr. Jack sonville, FL 32223	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Consulting and training for sitework development	
ARTICLE IV SHARES	
The number of shares of stock is:	
2007 - كورون ك كورون كورون كو	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Kimberly S. Bryan - Pres / VP / Secy / Treas.	T
List name(s), address(es) and specific title(s):	
List name(s), address(es) and specific title(s): Kimberly S. Bryan - Pres / VP / Secy / Treas. IIb70 Thornapple Dr.	TITIC
Tack and the Fr. 22222	C
11670 Thornapple Dr. Jack sonville, FL 32223	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
Kimberly S. Bryan 11670 Thornapple Dr.	
11670 Thornapple Dr.	
Jacksonville, FL 32223	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Kimberly S. Bryan	
Kimberly S. Bryan 11470 Thornapple Dr. Jacksonville, FL 32223	
Jack Sonville, FL 32223	
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	
Kimberly S. Bryan 9-7-07	
Signature/Registered Agent Kimberly S. Bryan Date	

Signature/Incorporator

9-7-07 Date