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# **COVER LETTER**

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

<sub>SUBJECT:</sub> Gras	shopper Consulting, Ir	nc.	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	
□ \$70.00 Filing Fee	Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Robin Spillias	e (Printed or typed)	
	3262 Belle MeadeTra	. ,	
	Tallahassee, Florida 3	32311 , State & Zip	
	850-210-3818	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:

Grasshopper Consulting, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3262 Belle Meade Trail Tallahassee, Florida 32311

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Consulting in marketing, life coaching and training.

### 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):

Robin Spillias President 3262 Belle Meade Trail Tallahassee, Florida 32311 O7 DEC 21 PM 3: 21
SEURETARY OF STATE
AND A SSEE, FLORIDA

# ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Robin Spillias 3262 Belle Meade Trail Tallahassee, Florida 32311

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Robin Spillias 3262 Belle Meade Trail Tallahassee, Florida 32311

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

Date

Date

D7 DEC 21 PM 3: 21