

P08000051987

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 MAY 23 PM 2:35

APPROVED  
AND  
FILED

B. McKnight MAY 27 2008

## COVER LETTER

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

**SUBJECT:** CONSULTING ASSOCIATES OF SOUTH FLORIDA, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status  
**ADDITIONAL COPY REQUIRED**

FROM: ISABEL ABREU  
Name (Printed or typed)

11780 SW 171 TERR  
Address

MIAMI, FL 33177  
City, State & Zip

786-306-2376  
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:

CONSULTING ASSOCIATES OF SOUTH FLORIDA, INC

## **ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

11780 S.W. 171 TERR  
MIAMI, FL 33177

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO PERFORM ALL LEGAL SERVICES IN THE STATE OF FLORIDA

## **ARTICLE IV SHARES**

The number of shares of stock is:

100 SHARES AT \$1.00 PAR VALUE

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

ISABEL ABREU  
11780 SW 171 TERR  
MIAMI, FL 33177

## **ARTICLE VI REGISTERED AGENT**

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

ISABEL ABREU  
11780 SW 171 TERR  
MIAMI, FL 33177

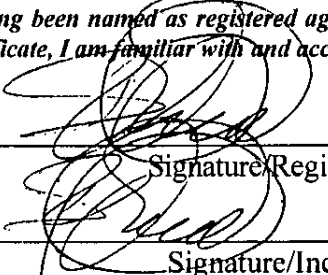
## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ISABEL ABREU  
11780 SW 171 TERR  
MIAMI, FL 33177

\*\*\*\*\*

*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

5/20/2008

\_\_\_\_\_  
Date

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

5/20/2008

\_\_\_\_\_  
Date

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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