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	(Requestor's Name)			
	(Address)			
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	(Address)			
	(City/State/Zip/Phone #)			
PICK-UF	P WAIT	MAIL		
	(Business Entity Name)			
•	(Dusiness Entry Harrie)			
	(Document Number)			
Certified Copies	Certificates of S	Status		
Special Instructions to Filing Officer:				
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COVER LETTER

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

SUBJECT: The Cai	rn Group Inc.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	icles of incorporation and	l a check for:
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: As	hley P. Ross Name	(Printed or typed)	
	2451 Orange Ave E.	Address	
	Tallahassee, Florida 32311	, State & Zip	
	850-980-0421 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:

The Cairn Group Inc.

ARTICLE II PRINCIPAL OFFICE

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

2451 Orange Ave E. Tallahassee, Flonda 32311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting Services

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Ashley Ross 2451 Orange Ave E Tallahassee, Fl 32311

ARTICLE VI REGISTERED AGENT

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

Ashley Ross 2451 Orange Ave E Tallahassee, FL 32311

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Ashley Ross 2451 Orange Ave E Tallahassee, FL 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 | Date | Date