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COVER LETTER

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

	SUBJECT:	Nurse Consulting Solutions, Inc.				
☐ \$70.00 ☐ \$78.75 Filing Fee Filing Fee & Certificate of Status Certificate of Status Filing Fee Filing Fee & Filing Fee, & Certified Copy Certified Copy & Certificate Status ADDITIONAL COPY REQUIRE		ATE NAME - <u>MUST INCL</u>	<u>UDE SUFFIX</u>)			
Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate Status ADDITIONAL COPY REQUIRE	Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:		
Malla and On date	 • · · · · · ·	Filing Fee	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status		
FROM: Melissa L Godek			ADDITIONAL CO	PY REQUIRED		
Name (Printed or typed)	FROM:					
10036 Richardson Court		10036 Richardson Court Address				
Orlando, Florida 32825						
City, State & Zip			· ·			
407-375-6337 Daytime Telephone number						
mgodek@nurseconsultingsolutions.com E-mail address: (to be used for future annual report notification)		mgodek@nursed	consultingsolutions.com	n notification)		

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

ARTICI	JES OF	INCORPOR	ATION
		11112/1/12/13/13	α

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

OS MATHER The name of the corporation shall be: Nurse Consulting Solutions, Inc.

PRINCIPAL OFFICE ARTICLE II

The principal street address and mailing address, if different is: 10036 Richardson Court, Suite 100, Orlando, Florida 32825

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to harness private interests in service to the public interest with ethical and lawful business practices.

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): Melissa Lynne Godek, President, 10036 Richardson Court, Orlando, Florida 32825

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Melissa Lynne Godek, 10036 Richardson Court, Orlando, Florida 32825

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Melissa Lynne Godek, 10036 Richardson Court, Orlando, Florida 32825

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 $\frac{05 - 10 - 2009}{\text{Date}}$ $\frac{05 - 10 - 2009}{\text{Date}}$ nature/Registered Agent Signature/Incorporator