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(Re	questor's Name)	
(Ad	dress)	
. (Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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COVER LETTER

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

SUBJECT:	LILAY CONSULTING	60 TRAINING	INC.
	(PROPOSED CORPORA	TTE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
EP.OM:	LKMY CONSULTIN	Teaining +	7v C
	2901 N.W. 12		
	SUNRISE, FLOR	•	
	305-987- Daytime 1		
******	E-mail address: (to be use	G CO M	notification)

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)

|--|

The name of the corporation shall be:

ZKRY CONSULTING & TRAINGING, INC.

ARTICLE II PRINCIPAL OFFICE

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

290 N.W. 126 AVENUE, *2-325 SUNRISE FL 33323 ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

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):

LISA KEMP-WILLIAMS - PRESIDENT 2901 N.W. 126 AVENE, \$2-325 SUNRISE, FL. 33323

ARTICLE VI REGISTERED AGENT

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

LISA KEMB- WILLIAMS 2901 N.W. 126 NEWE, \$ 2-325 SUARISE, FL. 33323

ARTICLE VII INCORPORATOR

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

LISA KEMP-WILLIAMS 2901 N.W. 126 NENVE, #2-325, GUNRISE, FL 33323 *********************

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