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

SECRETARY OF STATE TALLAHASSEE. FLORIDA

SUBJECT:	Coeporate La	gisties ¿ C	ansulling.	
	(PROPOSED CORPORA	TË NAME – <u>MUST INCL</u> I	UDE SUFFIX) ()	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$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 PY REQUIRED	
FROM: Dobby Williams Name (Printed or typed) P.O. Lon 4589 Address				
State & Zip State & Zip State & Zip Daytime Telephone number				

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I The name of the corporation shall be: Corporate Coristics & Consulting Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: P.O. B. 4589, Milton, floessa 32572 199-Miller Road, 428 Milton, fl 32570 The purpose for which the corporation is organized is: Tearsportation & Advicement The number of shares of stock is: INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Bobby J. Williams - CODD Boody T. Williams - Seagest Q ARMS 199 Miller ROAS, AZB Miltor, CL 32570 RTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Bosay J. Williams 199 Miller Road, swite # 28 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Bobby I. Williams 199 Miller Road suite 28 Miltor, flassa 32570 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