

P10000020908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

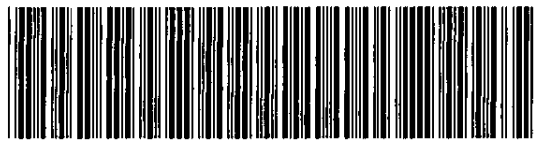
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

3-9-10

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COVER LETTER

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

SUBJECT: Cop Shopp Consultants 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
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Claude Shaver
Name (Printed or typed)

28870 Highway 19 N Suite 300
Address

Clearwater, FL 33761
City, State & Zip

877-491-7467
Daytime Telephone number

E-mail address: (to be used for future annual report 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)

ARTICLE I NAME

The name of the corporation shall be:

Cop Shopp Consultants Inc.

ARTICLE II PRINCIPAL OFFICE

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

28870 Highway 19 North Suite 300
Clearwater, FL 33761

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and All Law ful 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):

Claude Shaver - President
28870 Highway 19 N Ste 300 Clearwater, FL 33761

ARTICLE VI REGISTERED AGENT

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

Claude Shaver
28870 Highway 19 N Ste 300 Clearwater, FL 33761

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Claude Shaver
28870 Highway 19 N Ste 300 Clearwater, FL 33761

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

Claude Shaver
Signature/Registered Agent

March 3 2010
Date

Claude Shaver
Signature/Incorporator

March 3 2010
Date

FILED
10 MAR -8 PM 4: 17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA