

P10000027018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

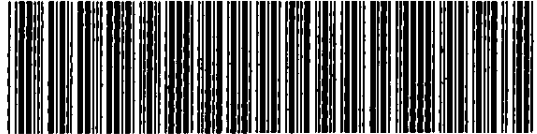
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3-29-10 Ch

## COVER LETTER

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

**SUBJECT:** JBG Consulting Co.

(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:** JBG Consulting Co.

\_\_\_\_\_  
Name (Printed or typed)

324 Cypress Landing Dr

\_\_\_\_\_  
Address

Longwood, Florida 32779

\_\_\_\_\_  
City, State & Zip

321-299-4527

\_\_\_\_\_  
Daytime Telephone number

bgabrovic@harmonimarket.com

\_\_\_\_\_  
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:

JBG Consulting Co.

## **ARTICLE II PRINCIPAL OFFICE**

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

324 CYPRESS LANDING DR  
LONGWOOD, FL 32779

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
TO PROVIDE MANAGEMENT CONSULTING SERVICES

## **ARTICLE IV SHARES**

The number of shares of stock is:  
100 SHARES

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JOHN GABROVIC	BOGUMILA GABROVIC -
-PRESIDENT	SECRETARY
324 CYPRESS LANDING	324 CYPRESS LANDING
DR,	DR,
LONGWOOD, FL 32779	LONGWOOD, FL 32779

## **ARTICLE VI REGISTERED AGENT**

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

JOHN GABROVIC  
324 CYPRESS LANDING DR  
LONGWOOD, FL 32779

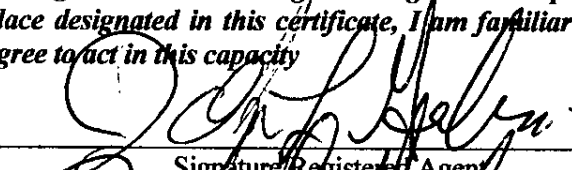
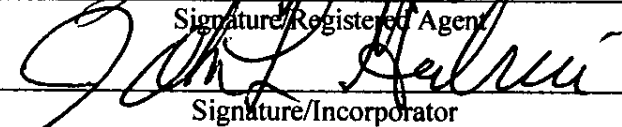
## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JOHN GABROVIC  
324 CYPRESS LANDING DR  
LONGWOOD, FL 32779

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*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

03/19/2010

Date

03/19/2010

Date

SECRETARY OF STATE  
TALLAHASSEE, FL 32399

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