

P10000061511

(Requestor's Name)

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(City/State/Zip/Phone #)

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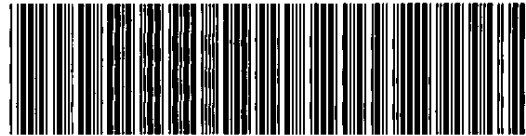
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/27/10--01024--014 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUL 27 PM 4:22

APPROVED
AND
FILED

1/1

COVER LETTER

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

SUBJECT: Cornerstone Sourcing Solutions, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: John M. West III

Name (Printed or typed)

4565 Mackinac Street

Address

Lake in the Hills, IL 60156

City, State & Zip

847-669-6490

Daytime Telephone number

john@westfinancialsolutions.com

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

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

APPROVE
AND
FILED

10 JUL 27 PM 4:26

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Cornerstone Sourcing Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4565 Mackinac Street, Lake in the Hills, IL 60156

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful purpose under Florida law

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

John M. West III, 4565 Mackinac Street, Lake in the Hills, 60156 President and Secretary

Robert M. Morris, 471 Dixie Place, Fancy Gap, VA 24328 Vice President and Treasurer

ARTICLE VI REGISTERED AGENT

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

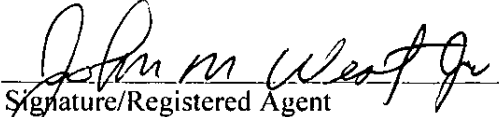
John M. West II, 2036 Palo Alto Ave., The Villages, FL 32159

ARTICLE VII INCORPORATOR

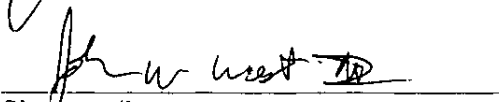
The name and address of the Incorporator is:

John M. West III, 4585 Mackinac Street, Lake in the Hills, IL 60156

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

7-21-10
Date


Signature/Incorporator

7-21-10
Date