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COVER LETTER

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

	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: B &	K CONSULTING FIRM, INC. Nam	e (Printed or typed)	

DAVIE, FL. 33330

City, State & Zip

954-205-1244

Daytime Telephone number

KBCROWLEY@BELLSOUTH.NET

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:

B & K CONSULTING FIRM, INC.

PRINCIPAL OFFICE ARTICLE II

The principal street address and mailing address, if different is: 11892 ACORN DRIVE DAVIE, FL. 33330

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **BUSINESS CONSULTING**

ARTICLE IV SHARES

The number of shares of stock is: 100

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): **ELIZABETH CROWLEY PRESIDENT** 11892 ACORN DRIVE **DAVIE, FL. 33330**

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: **ELIZABETH CROWLEY** 11892 ACORN DRIVE DAVIE, FL. 33330

INCORPORATOR ARTICLE VII

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

11892 ACORN DRIVE DAVIE, FL. 33330

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///ncorporator