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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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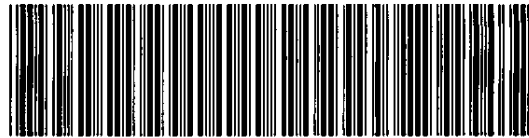
(Business Entity Name)

(Document Number)

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10/21/10--01017--015 **78.75

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2010 NOV - 1 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 NOV 3 2010

COVER LETTER

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

SUBJECT: BAZEMORE CONSULTANT GROUP, 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: HODARI J. BAZEMORE
Name (Printed or typed)

2445 SW 18TH TERRACE, APT #419
Address

FORT LAUDERDALE, FL 33315
City, State & Zip

954-663-1442
Daytime Telephone number

HBAZEMORE22@GMAIL.COM
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 22, 2010

HODARI J. BAZEMORE
2445 SW 18TH TERRACE APT 419
FORT LAUDERDALE, FL 33315

SUBJECT: BAZEMORE CONSULTANT GROUP, INC.
Ref. Number: W10000049884

We have received your document for BAZEMORE CONSULTANT GROUP, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

An effective date may be added to the Articles of Incorporation **if a 2011 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 710A00025066

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: **BAZEMORE CONSULTANT GROUP, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
2445 SW18TH TERR. APT#419
FORT LAUDERDALE, FL 33315

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
CONSULTANT GROUP

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HODARI BAZEMORE-PRESIDENT
Address: 2445 SW18TH TERR. APT#419
FORT LAUDERDALE, FL 33315

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: HODARI BAZEMORE
Address: 2445 SW18TH TERR. APT#419
FORT LAUDERDALE, FL 33315

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: HODARI BAZEMORE
Address: 2445 SW18TH TERR. APT#419
FORT LAUDERDALE, FL 33315

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]
Required Signature/Registered Agent

10/19/10
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature]
Required Signature/Incorporator

10/28/10
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA