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COVER LETTER

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

SUBJECT: Koester Consulting Solu	utions, Inc
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	icles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Mark Koester	e (Printed or typed)
1913 Yellow Fin Drive	Address
Port Orange, FL 32128	, State & Zip
386 341-7327 Daytime	Telephone number
mark@kcsinc.us E-mail address: (to be use	ed for future annual report notification)

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

100,000

, **ARTICLES OF INCORPORATION**In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the c	NAME Koester Consulting or corporation shall be:	ng Solutions, Inc	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address		dress, if different is:
	1913 Yellow Fin Drive		
	Port Orange, FL 32128	Port Orange, FL	32129
ARTICLE III	PURPOSE	-	
	which the corporation is organized is:		
i o provide d	computer and network consultin	g and solutions.	
ARTICLE IV	SHARES ares of stock is:100		
		POWODO	
	INITIAL OFFICERS AND/OR DIF		
Address:	1913 Yellow Fin Drive	Address:	
	Port Orange, FL 32128		-5
			22 등 등 등
Nome and T	riala.	N. LEGA	
Address:	Title:		CO
Addiess.		Address.	
			
			9.00 5
Name and Title:Address:			
		Address:	9
	REGISTERED AGENT orida street address (P.O. Box NOT acce		
Name:	MANL KOESTER		
Address:	1913 Yellow-Fix Drive Dood Orange Fr 3212		
ARTICLE VII	·		
	Idress of the Incorporator is:		
Name: Address:	Mark Koester 1913 Yellaw Fin D Port Dranse, Zu	<u>. 32128</u>	
Having been nan this certificate, I a	ned as registered agent to accept service am familiar with and accept the appointm	of process for the above stated corpor	ration at the place designated is t in this capacity
1//	all South		12 bil 2010
770	Required Signature/Registered A	gent	
I submit this doc document to the I	ument and affirm that the facts stated h Department of State constitutes a third deg	erein are true. I am aware that the force felony as provided for in s.817.155	alse information submitted in i
1///	white the	_	12/01/2010
	Required Signature/Incorpora	tor	Date