

P10000103988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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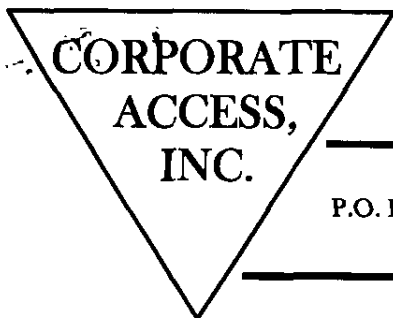
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T. Burch DEC 30 2010



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236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP:

12/29 Emily G.

- ☐ CERTIFIED COPY _____
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1. Advisory HB Group, Inc.
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

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: **ADVISORY HR GROUP, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
100 2nd Avenue So.
Suite 104S
St. Petersburg, FL 33701

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any and all lawful business purposes.

ARTICLE IV SHARES

The number of shares of stock is: 100,000 (par value \$0.10)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Scott Buchanan, DPST</u>	Name and Title: _____
Address: <u>100 2nd Avenue So.</u>	Address: _____
<u>Suite 104S</u>	_____
<u>St. Petersburg, FL 33701</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

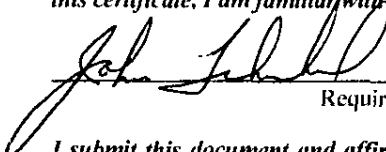
Name: Dilip Patel, P.A.
Address: 140 N. Pine Avenue
Oldsmar, FL 34677

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Scott Buchanan
Address: 100 2nd Ave. S., Ste. 104S
St. Petersburg, FL 33701

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

 FOR DILIP PATEL, PA
Required Signature/Registered Agent

12/28/10
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.


Required Signature/Incorporator

12/28/10
Date

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TALLAHASSEE, FLORIDA