## P11000060491

(Re	equestor's Name)					
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(Address)						
(Cit	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special instructions to Filing Officer:						

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J. STIMERS MAR 0.2. 2011

## **COVER LETTER**

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

SUBJECT: Starks Consulting, Inc				
(PROPOSED CORPORA'  Enclosed are an original and one (1) copy of the artic	<del></del>			
\$70.00 S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED		
FROM: <u>Jesse Bridges</u>	(Printed or typed)	TALLAHASS	2011 FEB 28	en mersen
2243 SW 80 Terr	Address	EFY English	8 PH 1:	
Miramar, FL 33025	State & Zip	(3) s	26	
954-661-8236  Daytime To	elephone number	·		
BridgesJB44@yahoo.cor	Υ I 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)

AT CLE I	NAME Starks Con	sulting, Inc	
The name of the co	orporation shall be:	Services	
ARTICLE II	PRINCIPAL OFFICE	Services	
•	Principal street address		address, if different is:
	2243 SW 80 Terr		
7	Miramar, FL 33025		
-			
ARTICLE III			
	hich the corporation is organized is ulting services.	:	
1 TOVIGE COILS	diting services.		
A DOTOL D. TV	OTTANEO		
	SHARES res of stock is: 100 shares		
ARTICLE V	INITIAL OFFICERS AND/OR	DIRECTORS  Name and Title:	·
Address:	2243 SW 80 Terr	Address:	
	Miramar, FL 33025		
Name and Ti	tle:	Name and Title:	
Address:		Address:	
,			
Name and Ti	tle:	Name and Title:	
Address:		Address:	
ARTICLE VI	REGISTERED AGENT		سادي لبا الما
	rida street address (P.O. Box NOT	acceptable) of the registered agent is:	ASS.
Name:	Jesse Bridges		<u>~</u> ∞ /
Address:	2243 SW 80 Terr Miramar, FL 33025		P P
	•	<del></del>	The same of the sa
	INCORPORATOR		
	ress of the Incorporator is:		26
Name: Address:	Tammi Kilbury/All Star Accounting	1 & Tax Services	•
Address:	6160 SW 8th St Plantation, FL 33317	<del></del>	
		<del>-</del>	
		ice of process for the above stated corp	
ihis ceruficale, I am	familiar with and accept the appoin	stment as registered agent and agree to c	act in this capacity
11.00 6	B. B. Jun		Noulis
JOSE N	Required Signature/Registere	d Agent	<u>טול ועלל</u>
1	Required Signature Registere	d Agent	Date
submit this docum	nent and affirm that the facts state	d herein are true. I am aware that the	false information submitted in a
		degree felony as provided for in s.817.1.	55, F.S.
Shawi	Required Signature/Incorp		12/10/10.
"SWILL MI AL	Required Signature/Incorp	orator	Date
		<del></del>	Luiv