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| (Requestor's Name) | | | | |
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| PICK-UP | WAIT | MAIL | | |
| (B | usiness Entity Name |) | | |
| (Document Number) | | | | |
| Certified Copies | Certificates o | f Status | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

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

SUBJECT: Phil Busey Agronomy Consulting 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 \$78.75 Filing Fee & Certificate of | | \$78.75 —Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate of | |
|---|--|--------------------------------------|---|--|
| | | Status ADDITIONAL COPY REQUIRED | | |

| FROM: Philip Busey Name (Printed or typed) | _ | |
|--|---------------|------------|
| 837 SW 120th Way | - | |
| Davie, FL 33325 | * | 2011 |
| City, State & Zip 954-579-3932 | CRETA | HAY 2 |
| Daytime Telephone number | - % -≺ | - P |
| phil@philbusey.com E-mail address: (to be used for future annual report notification) | | PM 2: 30 |

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 No. | | onsulting Inc. | |
|---|---|---|--|
| 46 | RINCIPAL OFFICE Principal street address 11 S. University Dr. #447 vie, Ft. 33328 | 837 SW 120th | ddress, if different is: Way 25 |
| | TRPOSE the the corporation is organized is: ful activities or business. | | |
| ARTICLE IV S The number of shares ARTICLE V II | | s | |
| | :Philip Busey, Director | | |
| Address: | 837 SW 120th Way | Address: | |
| | Davie, FL 33325 | | · · · · · · · · · · · · · · · · · · · |
| | | | · · · · · · · · · · · · · · · · · · · |
| Name and Title | : | Name and Title | |
| Address: | | Address: | |
| 11441400. | | | |
| | | | |
| | | | |
| Name and Title | | Name and Title: | |
| Address: | | Address: | |
| • | | | |
| | | | |
| 45/4/015 5 | 2010/2010 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | |
| | EGISTERED AGENT | | ZOII HAY |
| | a street address (P.O. Box NOT acceptable) of | | -8 = |
| Name: | Philip Busey | | 基 表 可 |
| Address: | 837 SW 120th Way | - | |
| | Davie, FL 33325 | - | 27 |
| ARTICLE VII IN | CORPORATOR | | |
| | ss of the Incorporator is: | | |
| Name: | Philip Busev | | 5% N 3€ |
| Address: | 837 SW 120th Way | • | ို့ သ |
| *************************************** | Davie, FL 33325 | - | 2 |
| Having been named of this certificate, I am fo | ns registered agent to accept service of process and line with and accept the appointment as regi | for the above stated corpo stered agent and agree to a | ration at the place designated in ct in this capacity |
| (| 10 1m/ | | M 00 0044 |
| | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | May 22, 2011 |
| | Required Signature/Registered Agent | | Date |
| I submit this docume | nt and affirm that the facts stated herein are | true. I am aware that the | false information submitted in a |
| document to the Dena | rtment of State constitutes a third legree felony | as provided for in £817.15 | 5. F.S. |
| | (1/1 15 | | |
| | W/D John | | May 22 2011 |
| | Required Signature/Incorporator | | May 22, 2011 Date |