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(Requestor's Name)				
(Address)				
· (Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	_			
Special Instructions to Filing Officer:				

Office Use Only

(191-WIZ000040148



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DIVISITY OF CORPORATIONS

12 AUG -8 PM 2: 56

an 8/9/12

COVER LETTER

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

SUBJECT: Jack Bloomfield Consulting Inc.	
(PROPOSED CORPORATE NAME – MUST INCLUI	DE 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 Status \$78.75 Filing Fee & Certified Copy ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status Y REQUIRED
	Tiegenes
FROM: John P. Bloomfield	
Name (Printed or typed)	
967 NW 127th Ave.	\
Address	SEC VISIO
Coral Springs, FL. 33071 City, State & Zip	SECKETAR VISICH OF C
954-551-3926 Daytime Telephone number	PH 2:
·	56
jackbloomfield78@aol.com	differentian) S

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



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

PEGENTED

12 AUG -8 AH II: 20

學人類自身接受不要自由的 ATIONS

July 31, 2012

JOHN P. BLOOMFIELD **967 NW 127TH AVENUE** CORAL SPRINGS, FL 33071

SUBJECT: JACK BLOOMFIELD CONSULTING INC.

Ref. Number: W12000040148

We have received your document for JACK BLOOMFIELD CONSULTING INC. and your check(s) totaling \$70.00. 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.

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) 245-6052.

Claretha Golden Regulatory Specialist II **New Filing Section**

Letter Number: 712A00020001

PLEASE SEE CHANGE (INTIALED)

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

FILED 4S

ARTICLE I	NAME Inck Bloomfold Consultin	SEGRETARY OF STATE
		-
APTICLE II	PRINCIPAL OFFICE	12 AUG -8 PM 2: 56
AKTICAN A	Principal street address	Mailing address, if different is:
	967 NW 127th Ave.	
	Coral Springs, FL. 33071	
ARTICLE III	which the corporation is organized is:	
	consulting services to substance abuse a	nd addiction treatment facilities
ARTICLE IV	SHARES ares of stock is None (00 SHAZES	
The number of sh	ares of stock is Nobe 100 3 HHZZ3	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS	
Name and : Address:	967 NW 127th Ave.	Name and Title:
Address:	Coral Springs, FL 33071	
	Colai Springs, FE. 3307	
Name and	Fitle:	Name and Title:
Address:		Address:
		Name and Title:
Address:		Address:
		
ARTICLE VI	REGISTERED AGENT	
	orida street address (P.O. Box NOT acceptable) of the	e registered agent is:
Name:	John P. Bloomfield	
Address:	967 NW 127th Ave.	
	Coral Springs, FL 33071	
ARTICLE VII	INCORPORATOR	
	Idress of the Incorporator is:	
Name:	John P. Bloomfield	
Address:	967 NW 127th Ave.	
	Coral Springs, FL, 33071	
		or the above stated corporation at the place designated in
inis cerujicuie, i i	am familiar with and accept the appointment as registe	rea agent and agree to act in this capacity
	Malee	<u>7-28-12</u>
	Required Signature/Registered Agent	Date
		e. I am aware that the false information submitted in a
document to the l	Department of State constitutes a third degree felony as	provided for in s.817.155, F.S.
(N)	120	7-28-12
	Required Signature/Incorporator	Date