## P120007/690

(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:				
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:	Sunrise Cons	Mtant Comp	any Inc		
r	(-1001 0.222 0.012 0.01		<del></del>		
Enclosed are an on	ginal and one (1) copy of the ar	ncies of incorporation an	d a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
		ADDITIONAL C	OPY REQUIRED		
• •					
FROM: _	Brenda I	ie (i inaced or typed)			
	121 Carlyle Circle				
Palm Harbor Fr 34683 City, State & Zip					
	727-286	- 8487 Telephone number			
	bren. du pui	s gmail.	Com		
E-mail address: (to be used 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)

ARTICLE I NAME The name of the corporation shall be	»: Sunrise Co	nsultant Compar	ly Inc.
ARTICLE II PRINCIPAL Principal		Mailing ad	dress, if different is:
To Consultant		icare IT Recruitin	g Industry.
ARTICLE IV SHARES The number of shares of stock is:	100		
Name and Title: Rres	ricers and/or direct Inda Dupus fre. Carly 12 Circle Litarbox Fu 3468.	S/dea Name and Title: Address:	
Name and Title:Address:		Name and Title:Address:	
		Name and Title:Address:	
ARTICLE VI REGISTERE	ED AGENT		
The name and Florida street add	ress (P.O. Box NOT acceptab	ole) of the registered agent is:	12 97
Address:	nda Dupus Cartyle Circle instarbor A 3	<del></del> <del>468.</del> 3	SECRETAR ISION OF C
ARTICLE VII INCORPORA	<del></del>		TO SECTION
The <u>name and address</u> of the Inco	nter Duoms		RPOS
Address:	Carly 16 Circles In 1 deports 3	<u>(e.</u> 46.83	RATIONS 1: 12
Having been named as registered this certificate, I am familiar with			
		= = =	
Sunda 1	od Signature/Registered Agent	t	8/16/2017 Date
I submit this document and affir document to the Department of St	m that the facts stated herei	n are true. I am aware that the f	alse information submitted in a
		jewny us provincu jur ut s.017.13.	7) I AM
Kalnder 1	LOULT ired in cornerator		8/16/2012
Danie	ired Signature Incorporator	·	Date