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Florida Department of State
Division of Corporations
Fax Audit Number Sheet

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : FRANK GUTTA CPA PA
Account Number : I19990000055
Phone : (954)452-8813
Fax Number : (954)452-8359

14 JUL -7 AM 11:41

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Cgilbert@guttashartz.com

14 JUL -7 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

Albert & Associates Consulting, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	$78.75

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Jul. 7. 2014 2:16PM No. 3332 P. 3

H14000154183

14 JUL -7 AM 11:41

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: Albert & Associates Consulting Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
9715 W Broward Blvd
#193
Plantation, FL 33324

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
This corporation may engage in any and all lawful activities or business permitted under the laws of the United States, the state of Florida or any other state, country, territory or nation.

ARTICLE IV SHARES
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Albert Kaufman, President
Address: 9715 W Broward Blvd
#193
Plantation, FL 33324

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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(cont.)

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: Albert Kaufman

Address: 9715 W Broward Blvd. #193

Plantation, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Albert Kaufman

Address: 9715 W Broward Blvd. #193

Plantation, FL 33324

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

X _____ 6-24-14

Required Signature/Registered Agent 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.

X _____ 6-24-14

Required Signature/Incorporator Date

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