Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000278993 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone Fax Number

: (850)222-1092 : (850)878-5368

date of submission 12/3

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

Email	Address	12			

FLORIDA PROFIT/NON PROFIT CORPORATION

Harrier Professional Services, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04.5
Estimated Charge	\$70.00

DEC = 5 2014

T. SCOTT

Electronic Filing Menu

Corporate Filing Menu

Help

2

COVER LETTER

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

Han SUBJECT:	rier Professional Services, Inc.		
SCHOLC1	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an	original and one (1) copy of the arti	cles of incorporation and	d a check for:
□ \$70.0	0 □ \$78.75	□ \$78.75	\$87.50
Filing Fe		Filing Fee	Filing Fee.
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status
		ADDITIONAL CO	DPY REQUIRED
	•		
	Linia Micanagaint		
FROM:	Eoin Fitzpatrick		
	Name	(Printed or typed)	
	PO BOX 7775		
	A	ddress	
	Tampa FL 33673		
	Cir.	State & Zip	
	City, s	state & Zip	
•	Daytime Te	lephone number	
		,	
_			
•	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)

	NCIPAL OFFICE Principal <u>street</u> address	Mailing addres	ss, if different is:
1228 EAST 7TH AVE		PO BOX 7775	
TAMPA F1. 33605		TAMPA, FL 33673-777	75
	POSE providing ex the corporation is organized is:	pert consulting in matters of inf	-
			Company Company
ARTICLE IV SHA	RES 1000		DEC -3
	stock is:		=
RTICLE V INT	TAL OFFICERS AND/OR DIRECTOR		AM 11: 51
RTICLE V INT	TAL OFFICERS AND/OR DIRECTOR Eoin Fitzpatrick, Chief Executive Officer PO BOX 7775	<u>s</u>	
Name and Title	TAL OFFICERS AND/OR DIRECTOR Eoin Fitzpatrick, Chief Executive Officer	S Name and Title:	
Name and Title	TAL OFFICERS AND/OR DIRECTOR Eoin Fitzpatrick, Chief Executive Officer PO BOX 7775	S Name and Title:	
Name and Title Address	TAL OFFICERS AND/OR DIRECTOR Eoin Fitzpatrick, Chief Executive Officer PO BOX 7775	Name and Title: Address: Name and Title:	
Name and Title Address Name and Title:	Executive Officer PO BOX 7775 TAMPA FL 33673-7775	Name and Title: Address: Name and Title:	
Name and Title Address Name and Title: Address	Executive Officer PO BOX 7775 TAMPA FL 33673-7775	Name and Title: Address: Name and Title: Address:	
Name and Title Address Name and Title: Address	TAL OFFICERS AND/OR DIRECTOR Eoin Fitzpatrick, Chief Executive Officer PO BOX 7775 TAMPA FL 33673-7775	Name and Title: Address: Name and Title: Address:	

Name and	1 Title:	Name and Title:	
Address		Address:	
			·····
ARTICLE VI	REGISTERED AGENT	Cali	
Name:	orida street address (P.O. Box NOT acceptable) CT Corporation System	or the registered agent is:	
Address:	1200 South Pine Island Road	_	
Addiess.	Plantation, FL 33324		DEC
			င်
ARTICLE VII	INCORPORATOR		₽
The name and ad	dress of the Incorporator is:		A
Name:	Foin Fitzpatrick		5
Address:	PO BOX 7775		
	TAMPA FL 33673-7775		
		_	
		فيد فيميد	
Having been nam this certificate, I a	ned as registered agent to accept service of proc om familiar with and accept the appointment as	renistered upent and norse to	oration at the place de act in this capacity
Having been name this certificate, I a	ned as registered agent to accept service of procum familiar with and accept the appointment as CT Corporation System Required Signature/Registered Agent	renistered upent and norse to	oration at the place de act in this capacity (2/3//4

850-617-6381

12/4/2014 11:54:11 AM PAGE 1/001 Fax Server



December 4, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

*PE-SIRMITA

SUBJECT: HARRIER PROFESSIONAL SERVICES, INC.

REF: W14000072366

dale of submission

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please have somone representing C T CORPRATION SYSTEM to sign as registered agent.,

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section FAX Aud. #: B14000278993 Letter Number: 814A00025544

PECENED

14 DEC -4 PM 3: 00

ALLNEASSEENSIAIE.