

From:

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#102 P.001/003

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800) 221-2972
Fax Number : (888) 692-9256

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
The Volpe Consulting Group Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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From:

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#102 P.002/003

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: The Volpe Consulting Group Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1420 Westbrook Dr

Sarasota, FL 34231

Mailing address, if different is:

1420 Westbrook Dr

Sarasota, FL 34231

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any lawful act or activity for
which corporations may be organized.

ARTICLE IV SHARES 1,000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jean Volpe, Vice President

Address: 1420 Westbrook Dr
Sarasota, FL 34231

Name and Title: _____

Address: _____

Name and Title: Anna Volpe, Secretary

Address: 1420 Westbrook Dr
Sarasota, FL 34231

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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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:

Joseph Volpe

Address:

1420 Westbrook Dr.

Sarasota, FL 34231

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name:

Joseph Volpe

Address:

1420 Westbrook Dr.

Sarasota, FL 34231

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.

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.817.135, F.S.

Required Signature/Incorporator

Date