

P/600047319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

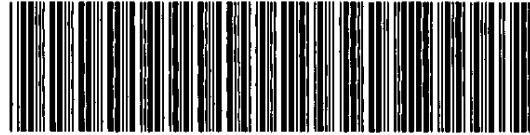
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/23/16--01040--007 **78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY 23 PM 1:50

mjl

COVER LETTER

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

SUBJECT: The Hadley Consulting Group, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 COPY REQUIRED

FROM: Christopher H. Strange
Name (Printed or typed)
823 E River Dr.
Address
Tampa, FL 33617
City, State & Zip
8135047932
Daytime Telephone number
cstrange@uchicago.edu
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: The Hadley Consulting Group, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

823 E River Dr.

Tampa, FL 33617

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A. To engage in and transact any lawful business for corporations that may be incorporated under the Florida General Corporation Act. No other purpose limits this general purpose in any way.

B.) To do such other things as are incidental to the purposes of the Corporation or necessary or desirable in order to accomplish them.

C.) To provide general business consultation and custom software services.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christopher H. Strange, President

Name and Title: Thomas A. Withstandley

Address 823 E. River Dr.

Address: 6110 Marta Dr.

Tampa, FL 33617

Tampa, FL 33617

Name and Title: Tyler A. Withstandley

Name and Title: _____

Address 15501 Bruce B Downs Blvd

Address: _____

Apt. 3609

Tampa, FL 33647

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Christopher H. Strange

Address: 823 E. River Dr.

Tampa, FL 33617

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Christopher H. Strange

Address: 823 E. River Dr.

Tampa, FL 33617

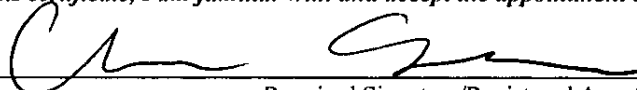
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

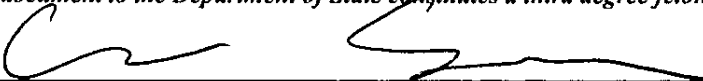
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

05/20/2016
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.


Required Signature/Incorporator

05/20/2016
Date