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(Requestor's Name)

(Address)

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PICK-UP WAIT MAIL

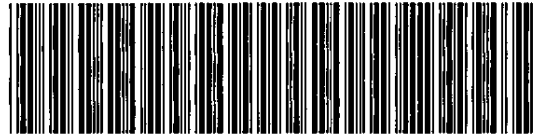
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 JUL 18 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ms 7/20/16

COVER LETTER

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

SUBJECT: HAESER CONSULTANTS GROUP CORP.
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Michael Marcel Antunes Haeser
Name (Printed or typed)

2675W 66 St APT 14 33016
Address

Hialeah, FL 33016
City, State & Zip

(786) 838 3997
Daytime Telephone number

haesergrupp@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: Harzer Consultants Group, Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2675W 66 ST APT 14
Hialeah, 33016

2675W 66 ST APT 14
Hialeah, 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: BUSINESS CONSULTANT
REGARDING ANY ASPECTS PERTAINING
TO INFORMATION TECHNOLOGY.

ARTICLE IV SHARES

The number of shares of stock is: 100

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Harzer President Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: X ANA RAQUEL JOSS. TEIXEIRA HAESER
 Address: 2675 W 66 ST APT 14
HALEAH / FL 33016

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ARTICLE VII INCORPORATOR

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

Name: Michael Marcel Antunes Haeser
 Address: 2675 W 66 ST APT 14
Hialeah 33016

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

X Ana Haeser _____ 07/13/2016
 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.

Michael Haeser _____ 07/13/2016
 Required Signature/Incorporator Date