

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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.

(((H17000082198 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:

: CORP USA Account Name

Account Number: 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

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

Rmail	Address:				

FLORIDA PROFIT/NON PROFIT CORPORATION HBK CONSULTING, INC

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

N. SAMS MAR 28 2017

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efileovr.exe

3026333696

03/54/5014 16:37

PAGE 01/03

CORP USA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

RTICLE I NAM, he name of the corpor		G, INC			
RTICLE II PRIN	CIPAL OFFICE Principal street address	Mailing	address, if different is:		
780 N.E. 183RD ST	REET SUITE 607	2780 N.E. 183RI	2780 N.E. 183RD STREET SUITE 607		
MIAMI FL 33160		MIAMI FL. 33160			
THE PURPOSE FOR Which	the corporation is organized is:	LEGAL BUSINESS / ACTIV	TTY PERMITTED IN THE		
STATE OF FLORIDA	<u>. </u>				
		·			
		<u> </u>			
	<u>AL OFFICERS AND/OR DIRECTORS</u> BARBARA KERN (PRESIDENT	- }	7		
Name and Tit	2780 N.E. 183RD STREET APT 60	Name and Tille:	2 10 1		
Auditas	MIAMI FL 33160	Address:			
			12		
Name and Title	3:	Name and Title:			
Address		Address:			
Name and Title		Name and Title:			
Address					
					

Name ar	nd Title:	Name and Title:		
Address		Address:		
	REGISTERED AGENT			
Name:	Inrida street address (P.O. Box NOT acceptable) BARBARA KERN	of the registered agent is:		
Address:	2780 N.E. 183RD STREET APT 607	- .		
acq ess.	MIAM1 FL. 33160	- -		
		-		
ARTICLE VII	<u>INCORPORATOR</u>			
The name and se	ddress of the Incorporator is:			
Name:	BARBARA KERN	_		
Address:	2780 N.E. 183RD STREET APT 607	_		
	MIAMI FL 33160			
ARTICLE VIII Effective date, if (If an effective diling.)	EFFECTIVE DATE: 03/24/2017 other than the date of filing: attemption of the date must be specific and cannot be specificated and cannot b	. (OPTIONAL) not be more than five days prior or 90 days after the		
	inserted in this block does not meet the applicable ffective date on the Department of State's records	e statutory filing requirements, this date will not be listed as		
Having been nan this certificate, I	ned as registered agent to accept service of proce am familiar with and accept the appointment as r	ss for the above stated corporation at the place designated in egistered agent and agree to act in this capacity		
	Acres	03/24/2017		
	Required Signature/Registered Agent	Date		
I submit this doc document to the l	ument and affirm that the facts stated herein an Department of State constitutes a third degree felo	e true. I am aware that the false information submitted in a my as provided for in s.817.155, F.S.		
	frank	03/24/2017		
Requi	red Signature/Incorporator	Date		

03/24/2017 16:37 3056339696