

P18000050790

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
STORM CONSULTING INC**

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

6-7-18
G.M.

RECEIVED
2018 JUN -6 AM 11:02
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

18 JUN -6 AM 11:13
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAME STORM CONSULTING INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
100 EAST LINTON BLVD STE 502B

DELRAY BEACH FL 33483

Mailing address, if different is:
100 EAST LINTON BLVD STE 502B

DELRAY BEACH FL 33483

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 200

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SHAWN HIGGINS/ PRES.

Address 779 MANATEE BAY DRIVE

BOYNTON BEACH, FL 33435

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

18 JUN -6 AM 11:13
CLERK OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
DIVISION OF CORPORATION

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: SHAWN HIGGINS
Address: 779 MANATEE BAY DRIVE
BOYNTON BEACH, FL 33435

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DIVISION OF CORPORATION
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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SHAWN HIGGINS
Address: 779 MANATEE BAY DRIVE
BOYNTON BEACH, FL 33435

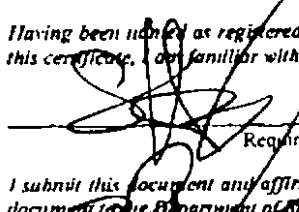
ARTICLE VIII EFFECTIVE DATE:

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

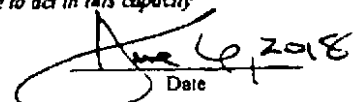
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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



Date June 6, 2018

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



Date June 6, 2018