

P95000021613

TRANSMITTAL LETTER

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

800001432138
-03/16/95--01068--036
***131.25 ***131.25

SUBJECT: UNIVERSITY CONSULTING GROUP, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check
for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

*Will
Wait*

FROM: Thomas J. Knox Jr.
Name (printed or typed)
2522 Staghorn Place
Address
Tallahassee, Fl. 32301
City, State & Zip
(904) 942-0109
Daytime Telephone number

FILED
95 MAR 16 PM 3:57
TALLAHASSEE, FL
SECRETARY OF STATE

*BT
3/16*

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED
95 MAR 16 PM 06:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: University Consulting Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2522 Staghorn Place
Tallahassee, Fl. 32301

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: (1) one

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Thomas J. Knox Jr.
2522 Staghorn Place
Tallahassee, Fl. 32301

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Thomas J. Knox Jr.
2522 Staghorn Place
Tallahassee, Fl. 32301

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

16th day of March, 1995.



Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: UNIVERSITY CONSULTING
GROUP

2. The name and address of the registered agent and office is:

THOMAS J. KNOX JR.
(Name)
2522 STAGHORN PLACE
(P.O. Box ~~NOT~~ acceptable)
TALLAHASSEE, FLA 32301
(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE Thomas Knox Jr.

DATE 3/16/95

REGISTERED AGENT FILING FEE: \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314