

P96000017586

TRANSMITTAL LETTER

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

STATE OF FLORIDA
-02/26/96-01041-0009
*****78.75 *****78.75

SUBJECT: CONSULTING PROFESSIONALS, 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

Additional Copy Required

FROM:

HUGO ARAQUE

Name (printed or typed)

10865 S.W. 112 ST. # 205

Address

MIAMI, FL. 33176

City, State & Zip

305 - 275 - 0016

Daytime Telephone number

STATE OF FLORIDA
DIVISION OF CORPORATIONS
RECEIVED

STATE OF FLORIDA
DIVISION OF CORPORATIONS
RECEIVED

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

g 2/27/96

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 FEB 26 AM 9:51

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:

CONSULTING PROFESSIONALS, INC.

ARTICLE II PRINCIPAL OFFICE

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

10865 S.W. 112, AVE # 205

MIAMI FL. 33176

ARTICLE III SHARES

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

ONE HUNDRED SHARES VALUED AT \$1.00 EACH.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HUGO ARAQUE

10865 SW 112 AVE # 205

MIAMI FL. 33176

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

HUGO ARAQUE
10865 S.W. 112 AVE #205
MIAMI FL. 33176

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

22 day of FEBRUARY, 19 96.



Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: CONSULTING PROFESSIONALS, INC.

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

HUGO ARAQUE
(NAME)

10865 SW 112 AVE # 205
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

MIAMI FL. 33176
(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.

Hugo Araque
(SIGNATURE)

2/22/96
(DATE)