# P9600 100110 TRANSMITTAL LETTER

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

CONSULTANTS, INC.

SUBJECT: KBT

1 000020245**7 1 -- 7** -12/10/36--01077--018 \*\*\*\*\*\*78.75

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	FROM: KWASI BADU-TWENEBOAH, Ph.D., P.E.  Namo (printed or typed)						7
		1599 BAY R	IDGE PLACE Address		Y OF STA	1:6 HV	
		المستراب والتناسي والمستروب	N, FLORIDA 3341 Sity, State & Zip	.4	STATE	58	
M	11/96		- 3005 e Telephone number				

(Proposed corporate name - must include suffix)

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

#### ARTICLES OF INCORPORATION

FILED

96 DEC -9 AM 9:58

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

#### ARTICLE I NAME

The name of the corporation shall be: KBT CONSULTANTS, INC.

#### ARTICLE II C PRINCIPAL OFFICE

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

1599 BAY RIDGE PLACE WELLINGTON, FLORIDA 33414

#### ARTICLE III SHARES

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

10,000 shares of common stock of no par value.

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KWASI BADU-TWENEBOAH, Ph.D., P.E.

1599 BAY RIDGE PLACE

WELLINGTON, FL 33414

#### ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

KWASI BADU-TWENEBOAH

1599 BAY RIDGE PLACE WELLINGTON, FL 33414

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

6 day of DECEMBER , 19 96 .

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

### Notarization is not required

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.

The name of the corporation is:	KBT CONSULTANTS, INC.	ECAMINES SE
·		9. 5.
2. The name and address of the regis	tered agent and office is:	TIP A
KWASI BADU-	TWENEBOAH, Ph.D., P.E.	
	(NAME)	<del>···</del>
	Y RIDGE PLACE	
(P.O. Bo	ox or Mail Drop Box NOT ACCEPTABLE)	
WELLINGTON		
	(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.

Know: Bady-trund 6/12/96 (SIGNATURE) (DATE)