TRANSMITTAL LETTER

017296

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

DATA CONSULT 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: CARLOS A. MOLINA
Name (Printed or typed)

8050 STIRRUP CAY CT.

BOYNTON BCH, FL 33436
City, State & Zip

56 | - 733 - 6552 Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

DATACONSULT INC.

PRINCIPAL OFFICE ARTICLE II

The principal place of business and mailing address of this corporation shall be: 8050 STIRRUP CAY CT. BOYNTON BEACH, FL 33436

SHARES ARTICLE III__

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

100.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

CARLOS A MOLINA, 8050 STIMBUP CAY CT, BOYNTON BEACH, FL 33436

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

CARLOS A. MOLINA, 8050 STILRUP CAY COURT, BOYNTON BEACH, FL 3343L

Signature/Incorporator

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

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/Registered Agent