### TRANSMITTAL LETTER

# P98000030760

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SECRETARY OF STATE DIVISION OF CORPORATION OF STATE OF ST

200002475992----04/01/98--01098--016 \*\*\*\*\*131.25 \*\*\*\*131.25

UBJECT: The Consultant Inc.  (Proposed corporate name - must include suffix)
· · · · · · · · · · · · · · · · · · ·
inclosed is an original and one (1) copy of the articles of incorporation and a check
\$70.00 \$78.75 \$122.50 \$131.25 Filling Fee Filling Fee Filling Fee,
& Certificate & Certified Copy Certified Copy & Certificate
Also: Fictions NAME Registration and check for \$90.00
FROM: WILL
Name (printed or typed)
P.O. Box 31112
Address
PAIN BEACH GARdens, Fl. 33420
City, State & Zip
(561) 630-7545
Daytima Telephone number

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

LY 04-03-98

## ARTICLES OF INCORPORATION 98 APR -1 AM 9: 35

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 1 NAME

The name of the corporation shall be:

The Consultant INC.

#### ARTICLE II PRINCIPAL OFFICE

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

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

1000 Shores @ No par value

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

The name and address of the initial registered agent is:

JUNO BEACH, FL.

#### ARTICLE V INCORPORATOR(S)

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

Will 44 uno lago Deive Juno Beach, Fl. 33408

Articles of Incorporation Filing Fee - \$35

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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	e of the corporation is:	The Consul	tant Ide.
2. The name	e and address of the registere	d agent and office is:	
	W:LL		
	(r	Vame)	SION C
	44 UNO LAGO	Drive	7 027
	(P.O. Box	not acceptable)	
	Juno Beach,	FL 33408	AM 9:
	<del></del>	/State/Zip)	STATE ORATIO 9: 35
			ma <sub>n</sub> e. .a. P
Having been above states the appoint to comply w mance of my as registered	n named as registered agent a d corporation at the place des nent as registered agent and ith the provisions of all statut y duties, and I am familiar with d agent.	and to accept service signated in this certifi agree to act in this ca es relating to the prop a and accept the oblig	of process for the cate, I hereby accept apacity. I further agree per and complete perfor ations of my position
	(Signature)	· -	3-26-98 (Date)

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