TRANSMITTAL LETTER

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

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SUBJECT: STITT CONSULTING, TNC- (Proposed corporate name - must include suffix)			
Enclosed is an origina	(Proposed corpor		
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate
FROM: LORETTA P. STITT Name (Printed or typed)			
1000-40 AUE. No. Address			
St. PETERSBURG FL 33703 City, State & Zip 813-289-5927 (WORK)			
$\frac{813 - 525 - 3868 (HoHE)}{\text{Daytime Telephone number}}$			

SECRETARY OF STATE
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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:

STITT CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

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

1000-40 Ave. No. St. PETERSBURG, FL 33703

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LORETTA P. STITT 1000-40 AUG. No. St. PETERSBURG FC 33703

ARTICLE V INCORPORATOR

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

LORETTA P. STITT 1000 40 AVE. HO. ST. PETERSBURG, PC 33703

Signature/Incorporator

6/9)
Date

(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

Date