

1.) CORPORATION NAME: <b>ADK Consulting, Inc.</b>	DUE DATE: <b>7/31/2013</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>INCORP SERVICES INC 7288 HANOVER GREEN DR MECHANICSVILLE, VA</b>	SCC ID NO: <b>F1866773</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HANOVER COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>10,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	10,000
CLASS	AUTHORIZED				
COMMON	10,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>FL</b>					

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: PO BOX 330906  CITY/ST/ZIP: ATLANTIC BEACH, FL 32233	
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7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DOUGLAS R KUELPMAN		
TITLE: PRESIDENT		
ADDRESS: 802 PROVIDENCE ISLAND CT.		
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32225		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ANNELL S KUELPMAN		
TITLE: VICE PRESIDENT		
ADDRESS: 802 PROVIDENCE ISLAND CT.		
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32225		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ DOUGLAS R KUELPMAN	DOUGLAS R KUELPMAN, PRESIDENT	9/3/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.