P[6000009300]

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	siness Entity Na	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
,		
	Office Use Or	nlv



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01/22/16--01033--019 **35.00

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01/22/16--01033--021 **8.75

01/22/16--01033--022 **8.75



FEB - 2 2016 T. BROWN

COVER LETTER

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

SUBJECT:	MSG CONSUL			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM: MITCHEL S. GUTTENBERG Name (Printed or typed)				
2775 NE 187 M STREET, SUITE 207				
AVENTURA, FL 33180 City, State & Zip				
_		617-6875		
_	·	Telephone number BERGE GMAIL. (d for future annual report i	COM	

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation	name of the corporation shall be: MSG CONSULTING, TNC.		
<u>ARTICLE II PRINCI</u>	PAL OFFICE Principal street address	M	failing address, if different is:
	187TH ST, SUITEZO	77	
AVENTURA,	FL 33180		
ARTICLE III PURPOS The purpose for which the	SE corporation is organized is:		
PROF	ESSIGNAL CONSULTIN	G SERVICE	3
			Tiple Control
			ASS
			Erg PH
	- Add All All All All All All All All All		(A)
			5
ARTICLE V INITIAL	OCK IS: 5,000 OFFICERS AND/OR DIRECTORS MITCHEL S. GUTTENBENG-	PRESName and Title:	NANCY RAND V. P.
Address	2775 NE 18773 T SUTT	207 Address	NANCY RAND V. P. Z775 NE 187 MST, SUITE 207
Addicss _	AVENTURA, FL 33180		AVENTURA, FL 33/80
Name and Title	JAKE A GUTTENBERGE	Dia Name and Title	
_		•	
Address _	2775 NE 187 MST, SUTTO AVENTUM, FL 33180	Address.	
-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Name and Title:_		Name and Title:_	
Address _		Address: _	<u> </u>
-			· · · · · · · · · · · · · · · · · · ·

Name and Title:	Name and Title:
Address	Address:
	•
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box N	
Name: MITCHEL S. GI	ITENBEAG
Address: 2775 NE 11	B7 TST, SUITE 207
	
HVENTURA, FL	33180
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: MITCHEL S	GUTTENBROK
7775 NG 1	B7TB-, SUTTE 207
Address: CI/5 /VE /	81 ST, SUTTE 207
AVENTUMA, FL	<u>33180</u>
ARTICLE VIII EFFECTIVE DATE:	
Effective date, if other than the date of filing:	(OPTIONAL)
(If an effective date is listed, the date must be sp days after the filing.)	pecific and cannot be more than five business days prior or 90 business
Note: If the date inserted in this block does not m	eet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Department of	
Having been named as registered agent to accept	service of process for the above stated corporation at the place designated in
this certificate, I am familiar with and accept the a	ppointment as registered agent and agree to act in this capacity
Mary I let	1/15/16
Required Signature/Reg	istered Agent Date
I submit this document and affirm that the facts	stated herein are true. I am aware that the false information submitted in a
	third degree felony as provided for in s.817.155, F.S.
Mul	1/18/16
Required Signature/Incorporator	Date