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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLED

COVER LETTER

Filing Section
Division of Corporations

TO:

№ \$87.50 Filing Fee

SUBJECT: Business Management Consulting, Inc. (Name of Foreign Corporation)		
(Name of Foreign Corporation)		
Dear Sir or Madam:		
The enclosed Foreign Name Registration, certificate and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Mark Mare (Name of Person)		
(Name of Person)		
Besiness Management Consulting, Inc		
(Firm/Company)	•	
1209 NW 34th Ten (Address)		
(Address)		
Gainesville FL 3260 (City/State and Zip Code		
(City/State and Zip Code)		
For further information concerning this matter, pl	ease call:	
Mark Nane	at (352) 562-5011 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
,		
	MAN THE A PROPERTY	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
New Filing Section	New Filing Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		

\$96.25 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 15, 2009

MARK NAME 1209 NW 34TH TER GAINESVILLE, FL 32605

SUBJECT: BUSINESS MANAGEMENT CONSULTING, INC.

Ref. Number: W09000046055

We have received your document for BUSINESS MANAGEMENT CONSULTING, INC. and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Letter Number: 209A00033116

Valerie Herring Regulatory Specialist II New Filing Section

Division of Comparations DO DOV 6207 Well-bases Florida 2021

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

N COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
(Enter name of corporation; must include "INCORPORATED," "COMPANY) "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
E-MC Management Services, elm. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
. <u>Delavore</u> 3.	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
. 10/4/2009 5. perpetual ESS S	
(Date of incorporation) (Duration: Year corp. will cease to exist or "pre-mal")	┰.
(Date first transacted business in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	ٔיל
1209 NW 34th Tenac, Sainoville, FL 32605 SE ?	
(Principal office address) 1209 NW 34th Ten Gainesville, FL 32605	
(Current mailing address)	
Ceny legal activity (Management Consultains	,
(Purpose(s) of corporation authorized in kome state or country to be carried out in state of Florida)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name:	
Office Address: 1209 NW 34th Ten	
Gainsville, Florida 32685	
(City) (Zip code)	
0. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place lesignated in this application, 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 relative to the proper and complete performance of my dutie and I am familiar with and accept the obligations of my position as registered agent.	
Mara Mare	
(Registered agent's signature)	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

APPHOVED AND FILED

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman:	09 OCT 23 PM 2: 57
Address:	AFAP # *
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS President: MARK NAVE Address: 1209 NW 34th I Gainwall II 30	en 2605
Vice President:	
Secretary:	
Address:	
Treasurer:	
Address:	
	o the application listing additional officers and/or directors.
	ove as President
	er listed in number 12 of the application)
	NAVE as President
(Typed or printed name and	capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BUSINESS MANAGEMENT CONSULTING,
INC" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE
EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE
SIXTH DAY OF OCTOBER, A.D. 2009.

PILED

09 OCT 23 PM 2: 57

SECRETARY OF STATE
SECRETARY OF STATE

4738544 8300

090910350

AUT

AUTHENTY CATION: 7567891

DATE: 10-06-09

You may verify this certificate online at corp. delaware.gov/authver.shtml