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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 21, 2020

NON-PROFIT CONSULTING SERVICES, LLC 2343 CAROLTON ROAD MAITLAND, FL 32751

SUBJECT: NON-PROFIT CONSULTING SERVICES, LLC

Ref. Number: W20000018411

We have received your document for NON-PROFIT CONSULTING SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return 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) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 020A00003853

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### COVER LETTER

**TO:** Registration Section Division of Corporations

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

NON-PROFIT CONSULTING SERVICES, LLC 2343 CAROLTON ROAD MAITLAND, FL 32751

For further information concerning this matter, please call:

NAME: BARBARA WETZLER TELEPHONE NO: 407-341-0065

Enclosed is a check for the following amount: \$125.00

Mailing Address: Registration Section

Division of Corporations

PO Box 6327

Tallahassee, FL 32301

## ARTICLES OF INCORPORATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME: NON-PROFIT CONSULTING SERVICES, LLC

ARTICLE II - ADDRESS: 2343 CAROLTON ROAD, MAITLAND FL 32751

ARTICLE III - Registered Agent. Registered Office & Registered Agent's Signature

Name:

JENNIFER QUIGLEY

Address:

2343 CAROLTON ROAD, MAITLAND FL 32751

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 as provided for in chapter 608 F.S. Jennifer Duigle

Signature:

ARTICLE IV: Manager(s) MGR or Managing Member(s) MGRM:

Title: Name and Address

MGR BARBARA WETZLER

2343 CAROLTON ROAD MAITLAND, FL 32751

ARTICLE V: Effective Date, if other than the date of filing: 01/01/2020

#### REQUIRED SIGNATURE:

In accordance with section 608-408 (3). Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State Constitutes a third degree felony as provided for in s.817.155.F.S.

TYPED OR PRINTED NAME OF SIGNEE: Barbara Wetzler

Filing Fees:

\$125.00 Filing Fee: Already submitted