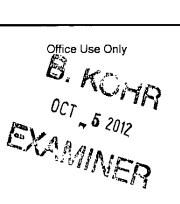
M120VUU05556

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	·
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





100240224191

10/03/12--01013--002 **125.00



COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: W & W Consulting LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Susan Wharton #16 15
Name of Person
W & W Consulting LLC
Firm/Company
122 Star Shell Drive
Address
Apollo Beach, FL 33572
City/State and Zip Code
susan.wharton@hotmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
1 of further information concerning this matter, please care.
Susan Wharton at (610) 291-3885
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: [Solution of Status] [Solution of Status]

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. W & W Consulting LLC	
(Name of Foreign Limited Liability Company; must include	de "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpos consent of the managers or managing members adopting the alter Company," "L.L.C," "LLC.")	e of transacting business in Florida and attach a copy of the written nate name. The alternate name must include "Limited Liability"
2. Pennsylvania (Jurisdiction under the law of which foreign limited liability company is organized) 3	. 26-3082410 (FEI number, if applicable)
4. 8/15/2008 (Date of Organization) 5	Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
_{6.} 10/1/2012	
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)
7. 122 Star Shell Drive	## 1 P
Apollo Beach, FL 33572	SEE P
(Street Address of	of Principal Office)
8. If limited liability company is a manager-managed	company, check here
9. The name and usual business addresses of the mana	ging members or managers are as follows:
Susan Wharton - 122 Star Shell Drive, Apol	lo Beach, FL 33572
10. Attached is an original certificate of existence, no more than 90 d the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be submit 11. Nature of business or purposes to be conducted or	itted.)
X Susan C. W	
· · · · · · · · · · · · · · · · · · ·	horized representative of a member.
(In accordance with section 608.408(3), F.S., the execu	tion of this document constitutes an affirmation under the

Typed or printed name of signee

Susan Wharton

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.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailable, the alternate to be used in the state of Florida is:				
2. The name and	the Florida street address	s of the registered agent and office are:		
In	Corp Services, Inc.			
		(Name)	-	
17	7888 67th Court No	orth		
_	Florida Street Ad	idress (P.O. Box <u>NOT</u> ACCEPTABLE)	•	
լ	oxahatchee	_{FL} 33470		
		City/State/Zip	-	

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, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

Incorp Services, Inc.

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE SEPTEMBER 19, 2012

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

W & W Consulting, LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Care ariene

Certification Number: 10569962-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp