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(Req	uestor's Name)			
(Address)				
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(City,	/State/Zip/Phone	; #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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November 7, 2017

JEFFREY WEIKERT 940 SANTA ROSA BOULEVARD UNIT 236 FORT WALTON BEACH, FL 32548

SUBJECT: JEFF WEIKERT CONSULTING INC.

Ref. Number: W17000089134

We have received your document for JEFF WEIKERT CONSULTING INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

www.sunbiz.org

Letter Number: 717A00022506

COVER LETTER

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

SUBJECT: Jeff Weiker	Consulting Inc.			
Enclosed is an original:	(PROPOSED CORPO	RATE NAME - MUST IN		
□ \$70.00 Filing Fec	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate	
FROM:	Jeffrey Weikert			
	Name	-		
	940 Santa Rosa Boulevard Unit 236			
		-		
	Fort Walton Beach FL 32548			
	City, State & Zip			
	850-377-3764			

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

E-mail address: (to be used for future annual report notification)

Daytime Telephone number

jobcoachjeff@outlook.com

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME The name of the corporation shall be:	nsulting Inc.	
ARTICLE II PRINCIPAL OFFICE		
Principal <u>street</u> address: 940 Santa Rosa Boulevard Unit 236	Mailing address, if different is:	
Fort Walton Beach FL 32548		
		
ARTICLE III PURPOSE The purpose for which the corporation is organized is		·
Division of Vocational Rehabilitation (DVR) to prov	ride Supported Employment and Employment Services to individu	als with
developmental disabilities. Pursuant to pages 24-25 c	of the Vendor Qualifications Manual (www.rehabworks.org) provi	ders must
present an IRS 501(c)(3) not-for-profit designation.	The registered agent, Jeffrey Weikert, has served as a provider for	the Florida
Division of Vocational Rehabilitation since 2009. He	meets all qualifications and has extensively researched market tro	ands: which
do suggest a need for providers to assist adults with o	levelopmental disabilities in Northwest Florida to find and mainta	in
employment in the community.	ARTICLE III-A and III-B	attached hereto -
ARTICLEIV MANNER OF ELECTION The manual of the bylaws	nanner in which the directors are elected and appointed:	
ARTICLE V INITIAL OFFICERS AND/OR DIK	ECTORS	
Name and Title: Larissa Lincoln , Director	Name and Title: Katic Rice , Director	
Address 4300-c Hazel Ave.	Address: 1634 Llani Lane	
Palm Beach Gardens, FL	33410 Gulf Breeze, FL 32563	
Name and Title: Monica Herrera Director	Name and Title: Phillip Weikert , Director	17
Address 249 Kathy Court	Address: 6446 NW Hope Court	030 330 341
Mary Esther FL 32569	Port St. Lucie, FL 34986	8
Name and Title: Jeffrey Weikert Presu	Seet Name and Title:	18 M 9: 16
Address 940 Santa Rosa Blud		वृत्ति क
Unit 236		
Ft Walton Beach FL	32548	

ARTICLE III-A

No part of the net carnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Articles Third hereof. No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these articles, this corporation shall not, except to an insubstantial degree, engage in any activities or exercise any powers that are not in furtherance of the purposes of this corporation.

ARTICLE III-B

Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

Name and Title		Name and Title:	
Address .			
			
Name and Title		Name and Title:	
Address			
ARTICLE VI The name and I	<u>REGISTERED AGENT</u> Torida street address (P.O. Box NOT ac Jeffrey Weikert	eceptable) of the registered ager	nt is:
Address:	940 Santa Rosa Boulevard	 Unit 236	
Address:	Fort Walton Beach FL	32548	
Name: Address:	Larissa Lincoln 4300-C Hazel Avenue Palm Beach Gardens, FL		
Effective date, it	other than the date of filing: Januare is listed, the date must be specific	and cannot be more than fiv	FIONAL) te days prior or 90 days after the filing.)
	inserted in this block does not meet the tive date on the Department of State's re		uirements, this date will not be listed as the
Having been na certificate, I am	med as registered agent to accept service familiar with and accept the appointment	ce of process for the above sta t as registered agent and agree	ated corporation at the place designated in the to act in this capacity
	Required Signature of Register	cd Agent	10/30/17. Date
I submit this doc to the Departmen	ument and affirm that the facts stated he it of State constitutes a third degree felo.	erein are true. I am aware tha ny as provided for in s.817.155	t any false information submitted in a docume i, F.S.
	Required Signature of Inc	- Cornorator	10/31/17 Date
	redance of the	on porator	∪aic