

P02000127203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

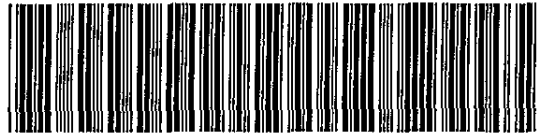
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

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

**SUBJECT:** LM Consulting Group, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Lisa Maki

Name (Printed or typed)

11811 Royal Palm Blvd, #203

Address

Coral Springs, FL 33065

City, State & Zip

(954) 227-7628

Daytime Telephone number

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

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### **ARTICLE I NAME**

The name of the corporation shall be:

LM Consulting Group, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

11811 Royal Palm Blvd, #203  
Coral Springs, FL 33065

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide marketing, graphic arts, bookkeeping and related business services to the public.

### **ARTICLE IV SHARES**

The number of shares of stock is:

500

### **ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

President/Director  
Lisa Maki  
11811 Royal Palm Blvd, #203  
Coral Springs, FL 33065

### **ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

Lisa Maki  
11811 Royal Palm Blvd, #203  
Coral Springs, FL 33065

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Lisa Maki  
11811 Royal Palm Blvd, #203  
Coral Springs, FL 33065

\*\*\*\*\*

*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 appointment as registered agent and agree to act in this capacity*

*Lisa Maki*

Signature/Registered Agent

11/20/02

Date

*Lisa Maki*

Signature/Incorporator

11/20/02

Date