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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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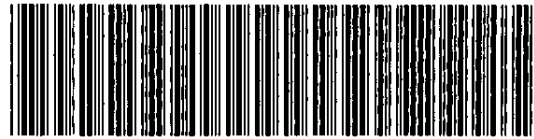
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
FILED

174

COVER LETTER

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

SUBJECT: De Novo Consultants 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 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: De Novo Consultants Inc. c/o C. Leigh Wilhite
Name (Printed or typed)
199 Sylvan Drive
Address
Atlantic Bch, FL 32233
City, State & Zip
(904) 238-9488
Daytime Telephone number
leighwilhite@gmail.com
E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
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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: De Novo Consultants, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal Street address is: 199 Sylvan Drive
Atlantic Beach, FL 32233

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Legal-Nurse Consulting

ARTICLE IV SHARES

The number of shares of stock is: Eleven

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: C. Leigh Wilhite President
Address: 199 Sylvan Drive
Atlantic Beach, FL 32233

ARTICLE VI REGISTERED AGENT

Name: C. Leigh Wilhite
Address: 199 Sylvan Drive
Atlantic Beach, FL 32233

ARTICLE VII INCORPORATOR

Name: C. Leigh Wilhite
Address: 199 Sylvan Drive
Atlantic Beach, FL 32233

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.

C. Leigh Wilhite
Registered Agent

01/03/2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

C. Leigh Wilkie
Incorporator

01/03/2011
Date

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA