

P11000029931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

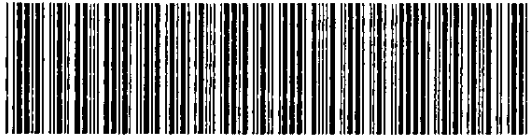
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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MAR 24 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PS 3/24/11

**COVER LETTER**

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

**SUBJECT: LKS CONSULTING, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: LKS CONSULTING, INC.  
Name (Printed or typed)

1171 TAYLOR AV.  
Address

DUNEDIN, FLORIDA, 34698  
City, State & Zip

727-734-3680 (CELL 727-631-5372)  
Daytime Telephone number

KITMRN@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

**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)

**ARTICLE I NAME** LKS CONSULTING, INC.  
The name of the corporation shall be:

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**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
1171 Taylor Ave.  
Dunedin  
Florida, 34698

Mailing address, if different is:  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
To provide consulting and promotional services in the fields of Medicine, Pharmaceutical and related areas; to employ persons as needed to provide such services; and to engage in all related, or non-related, activities, as may be, from time to time, allowed to Corporations by the Laws of the State of Florida.

**ARTICLE IV SHARES**  
The number of shares of stock is: One Hundred (100) shares of Common Stock

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**  
Name and Title: Katherine R. Meador, Pres/Director Name and Title: \_\_\_\_\_  
Address: 1171 Taylor Ave. Address: \_\_\_\_\_  
Dunedin, Florida, 34698  
Name and Title: Robert C. Meador, V Pres. Sec/Tres/Director Name and Title: \_\_\_\_\_  
Address: 1171 Taylor Ave. Address: \_\_\_\_\_  
Dunedin, Florida, 34698  
Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**  
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
Name: Robert C Meador  
Address: 1171 Taylor Ave  
Dunedin, Florida 34698

**ARTICLE VII INCORPORATOR**  
The name and address of the Incorporator is:  
Name: Katherine R. Meador  
Address: 1171 Taylor Ave  
Dunedin, Florida, 34698

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



Required Signature/Registered Agent

March 21, 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.



Required Signature/Incorporator

March 21, 2011

Date