

P13000036476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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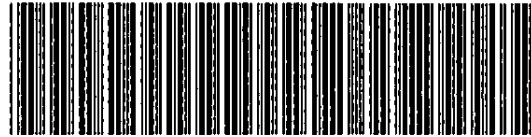
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 APR 22 PM 12:51

Ps 4/23/13

## COVER LETTER

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

SUBJECT: Kehoe Mgmt 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: Joseph D. Kehoe

Name (Printed or typed)

1748 Jupiter Cove Drive Bldg A Ste 118A

Address

Jupiter, FL 33469

City, State & Zip

\_\_\_\_\_  
Daytime Telephone number

david@bandrcpas.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)

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DIVISION OF CORPORATIONS

**ARTICLE I NAME**

The name of the corporation shall be:

Kehoe Mgmt Consultants, Inc.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1748 Jupiter Cove Drive

Bldg A Ste 118A

Jupiter, FL 33469

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Provide management and

consulting services to various businesses.

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Joseph D. Kehoe

Name and Title: \_\_\_\_\_

Address 1748 Jupiter Cove Dr

Address: \_\_\_\_\_

Bldg A Ste 118A

Jupiter, FL 33469

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

FILED  
SECRETARY OF STATE (Cont.)  
DIVISION OF CORPORATIONS

13 APR 22 PM 12:51

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: Claire Rosen

Address: 15575 Woodmar Court  
Wellington, FL 33414

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Joseph D. Kehoe

Address: 1748 Jupiter Cove Dr Bldg A Ste 118A  
Jupiter, FL 33469

*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*

Claire Rosen

Required Signature/Registered Agent

4/16/13

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.*

Joseph Kehoe

Required Signature/Incorporator

4/9/13

Date