P1500001319a

(Requestor's Name)			
(Address)			
(Add	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
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COVER LETTER

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

SUBJECT: HOI	meowners Cons	-		
	(PROPOSED CORPO	DRATE NAME – <u>MUST INCL</u> I	UDE SUFFIX)	
Enclosed are an ori	ginal and one (1) copy of the	articles of incorporation and	l a check for:	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
		<u> </u>		
FROM:	lichelle Trudell	(D.: 4.1.		
9	100 SW 213 ST	ame (Printed or typed)		
		Address		
Cutler Bay FL 33189				
City, State & Zip				
7	86-356-8626			
Daytime Telephone number				
michelle.trudell@gmail.com				
E-mail address: (to be used for future annual report notification)				

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 22, 2015

MICHELLE TRUDELL 9100 S.W. 213TH ST. CUTLER BAY, FL 33189

SUBJECT: HOMEOWNERS CONSULTING, INC.

Ref. Number: W15000004591

We have received your document for HOMEOWNERS CONSULTING, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

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.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 515A00001321

www.sunbiz.org

of the of Communities and DO DOV COOK (B.D.). DI 11 000

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

The name of the corpora	tion shall be: Homeowners C	onsulting	, Inc.		51	
ARTICLE II PRI	NCIPAL OFFICE Principal street address		Mailing address, i	if different is:		1
9100 SW 21				्रा _{है,}	PH	<u> </u>
Cutler Bay F	FL 33189				Ψ. 	
		=		VON 3.E.	ယ	
ARTICLE III PUR The purpose for which t renting, mai	<u>Pose</u> he corporation is organized is: provide in ntaining, updating, and	nformation and	resources o	on buying, erties.	sellir	ng,
ARTICLE IV SHA The number of shares of	VRES 100					
ARTICLE V INIT	TIAL OFFICERS AND/OR DIRECTOR	es				
Name and Title	Michelle Trudell, President	Name and Title:				
Address	9100 SW 213 Street	_ Address:				
	Cutler Bay FL 33189	<u>.</u> -				<u> </u>
Name and Title:		Name and Title:	~ .			
Address		_ Address:				
		- ·				
Name and Title:		_ Name and Title:				
Address						
						

Name and 1	Title: Name an	d Title:
Address	Address:	
		EB - E
	REGISTERED AGENT	
The <u>name and Flor</u>	ida street address (P.O. Box NOT acceptable) of the register	ered agent is:
Name:	Midelle Trucell	ered agent is: PA 1: 33
Address:	9100 Sw 21357	33
-	CUTIER BAY FL 3319	37
ARTICLE VII	INCORPORATOR	
The name and add	ress of the Incorporator is:	
Name:	Michelle Trudell	
Address:	9100 SW 213 St	
	Cutler Bay FL 33189	
	d as registered agent to accept service of process for the all a familiar with and accept the appointment as registered agent Required Signature/Registered Agent	
	nent and affirm that the facts stated herein are true. I am	
document to the De	partheni of State constitutes a third degree felony as provid	led for in s.817.155, F.S. 1/14/2015
	Required Signature/Incorporator	Date
	/	