

P15000039076

Division of Corporations

Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
Phone : (813)229-7600  
Fax Number : (813)229-1660

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: jfeller@sik-law.com

FLORIDA PROFIT/NON PROFIT CORPORATION  
Kienzle Consulting, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

15 APR 30 AM 11:48  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 APR 30 PM 1:47  
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TALLAHASSEE, FLORIDA

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

**ARTICLE I NAME** Klenzle Consulting, Inc.  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**  
Principal ~~street~~ address: 17056 Marina Cove Lane  
Fort Myers, Florida 33908  
Mailing address, if different is: 1000 Jackson Street  
Toledo, Ohio 43604

**ARTICLE III PURPOSE** Any lawful purpose for which corporations may be formed  
The purpose for which the corporation is organized is: \_\_\_\_\_  
under Florida law.

FILED  
15 APR 30 11:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV SHARES** 100 shares of no par common stock  
The number of shares of stock is: \_\_\_\_\_

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

Name and Title:	<u>David W. Klenzle - President</u>	Name and Title:	<u>David W. Klenzle - Director</u>
Address:	<u>PMB 130, Pak N Ship of Sanibel</u> <u>2230 Palm Ridge Road, Unit 10</u> <u>Sanibel, Florida 33957</u>	Address:	<u>PMB 130, Pak N Ship of Sanibel</u> <u>2230 Palm Ridge Road, Unit 10</u> <u>Sanibel, Florida 33957</u>

Name and Title:	<u>John W. Hilbert II - Assistant Secretary</u>	Name and Title:	_____
Address:	<u>1000 Jackson Street</u> <u>Toledo, Ohio 43604</u>	Address:	_____

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____

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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: John W. Hilbert II  
 Address: 17066 Marina Cove Lane  
Fort Myers, Florida 33908

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: John W. Hilbert II  
 Address: 1000 Jackson Street  
Toledo, Ohio 43604

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

John W. Hilbert II  
 Required Signature/Registered Agent John W. Hilbert II

April 29 2015  
 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.*

John W. Hilbert II  
 Required Signature/Incorporator John W. Hilbert II

April 29 2015  
 Date