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SECRETARY OF STATE TALLAH - SSEEL FLORIDA

JUL 2 3 2015 T CANNON

COVER LETTER

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

SUBJECT:	WEALTH CONSCIOUSNESS UNIVERSITY, INC.			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)	
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate o Status	
FROM:				
	Name (Printed or typed)			
		N. Cicero Ave.		
	Address			
	Chicago, IL 60646			
-	City, State & Zip			
	773-736-8800			
	Daytime Telephone number			
	info@computeraccountinginc.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

ARTICLES OF INCORPORATION

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

FILEO

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I . NAM. The name of the corpor		niversity, Inc.	15 JUL 16 PM 4: 0
<u>ARTICLĘ II PRIN</u>	CIPAL OFFICE Principal street address		Mailing address, if different is:
5021 SouthWest 201st Terrace		P	P.O. Box 328798
Southwest Ranches, F	L 33332	F	Fort Lauderdale, FL 33332
• •	the corporation is organized is: To rende personal property. To buy, sell, or otherw		all types to buy, sell, or otherwise deal in at
transaction of any or a	Il lawful business for which Corporations	can be incorp	porated under the Florida Business Corporation
Act.			
	f stock is:		
The number of shares of sh	f stock is:		nd Title:
The number of shares of shares of the number of shares of the shares of	f stock is:	Name ar	
The number of shares of sh	AL OFFICERS AND/OR DIRECTORS le: Magdalena Baltyk, President 5021 SW 201st Terrace		
The number of shares of ARTICLE V INITA Name and Tit Address	AL OFFICERS AND/OR DIRECTORS Magdalena Baltyk, President 5021 SW 201st Terrace Southwest Ranches, FL 33332	Address	S:
The number of shares of sh	AL OFFICERS AND/OR DIRECTORS le: Magdalena Baltyk, President 5021 SW 201st Terrace Southwest Ranches, FL 33332 e: Megan Stangl, Secretary 5021 SW 201st Terrace	Address Address Name ar	nd Title:
The number of shares of ARTICLE V INITA Name and Tit Address Name and Titl	AL OFFICERS AND/OR DIRECTORS le: Magdalena Baltyk, President 5021 SW 201st Terrace Southwest Ranches, FL 33332 e: Megan Stangl, Secretary 5021 SW 201st Terrace	Address	nd Title:
The number of shares of ARTICLE V INITA Name and Tit Address Name and Titl	AL OFFICERS AND/OR DIRECTORS le: Magdalena Baltyk, President 5021 SW 201st Terrace Southwest Ranches, FL 33332 e: Megan Stangl, Secretary 5021 SW 201st Terrace	Address Address Name ar	nd Title:
The number of shares of ARTICLE V INITA Name and Tit Address Name and Titl Address	Magdalena Baltyk, President 5021 SW 201st Terrace Southwest Ranches, FL 33332 Megan Stangl, Secretary 5021 SW 201st Terrace Southwest Ranches, FL 33332	Address Name ar Address	nd Title:

Name ar	nd Title:	Name and Title:	
Addres	s	Address:	
	REGISTERED AGENT Storida street address (P.O. Box NOT accept	table) of the registered agent is:	
Name:	Magdalena Baltyk		
Address:	5021 SW 201st Terrace		
	Southwest Ranches, FL 33332		
ARTICLE VII	INCORPORATOR		SECRE TALL AH
The <u>name and a</u>	ddress of the Incorporator is:		_ > T/n
Name:	Lawrence Goldman		9 BSS
Address:	6306 N. Cicero Ave.		
	Chicago, IL 60646		F STATE FLORID/ 14:02
Effective date, if (If an effective of days after the fine the fine the fine the date of t	EFFECTIVE DATE: To other than the date of filing: date is listed, the date must be specific and ling.) The inserted in this block does not meet the appendictive date on the Department of State's respective date.	cannot be more than five busing	ess days prior or 90 business
Having been nat this certificate, I	med as registered agent to accept service of am familiar with and accept the appointment	process for the above stated corpo It as registered agent and agree to	ration at the place designated in act in this capacity 7/16/15
Required Signature/Registered Ager		- ent	Date
submit this document to the	cument and affirm that the facts stated here Department of State constitutes a third degre	ein are true. I am aware that the j	false information submitted in a
SA	Solum on		7/16/15
Requ	ired Signature/Incorporator		Date

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