

From:

Division of Corporations

08/15/2015 08:41

#909 P.001/004

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800) 221-2972
Fax Number : (888) 692-9256

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Nationwide Consulting Corp.

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 AUG 25 AM 8:05

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From:

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850-617-6381

8/25/2015 8:02:20 AM PAGE

1/001

Fax Server



August 25, 2015

FLORIDA DEPARTMENT OF STATE

Division of Corporations

BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

SUBJECT: NATIONWIDE CONSULTING CORP.

REF: W15000056383

15 AUG 25 PM 12:05
We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

15
Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return 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.

Jessica A Fason
Regulatory Specialist II

FAX Aud. #: H15000203783
Letter Number: 715A00017879

15 AUG 25 PM 12:06

P.O BOX 6327 - Tallahassee, Florida 32314

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15 AUG 25 AM 8:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

From:

08/25/2015 08:12

#909 P.003/004

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

ARTICLE I NAME

The name of the corporation shall be: 21st Century Consulting Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11893 Osprey Pointe Circle

Wellington, FL 33449

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct all activities set forth and permitted under and Florida corporation law

ARTICLE IV SHARES

The number of shares of stock is: 200 no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Russell J. Coyne, President

Name and Title: _____

Address 11893 Osprey Pointe Circle
Wellington, FL 33449

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

From:

08/25/2015 08:12

#909 P.004/004

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: Russell J. Coyne
Address: 11893 Osprey Points Circle
Wellington, FL 33449

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Russell J. Coyne
Address: 11893 Osprey Points Circle
Wellington, FL 33449

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TALLAHASSEE, FLORIDA

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

Russell J. Coyne
Required Signature/Registered Agent

8/24/15
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.

Russell J. Coyne
Required Signature/Incorporator

8/24/15
Date