

PI5000096724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

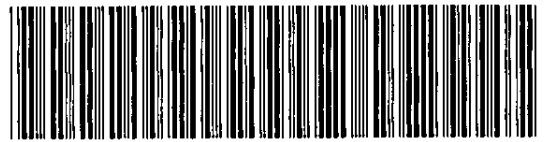
(Business Entity Name)

(Document Number)

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DATE: 12/4/15

NAME: KEEWAYDIN CONSULTING, INC

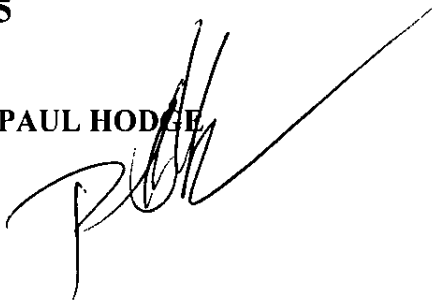
TYPE OF FILING: ARTICLES

COST: 70.00

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

A handwritten signature in black ink, appearing to read "Paul Hodge", is written over the printed name "ABBIE/PAUL HODGE". The signature is stylized and slanted.

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

ARTICLE I NAME KEEWAYDIN CONSULTING, INC.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address _____ Mailing address, if different is: _____
Diane V. Libby, CPA _____
32 City Hall Avenue _____
Torrington, CT 06790 _____

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: _____
To engage in consulting in medical field and any other business purpose that is permitted by law.

ARTICLE IV SHARES 5000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Irvin M. Modlin, President</u>	Name and Title:	<u>Irvin M. Modlin, Director</u>
Address	<u>2580 S. Ocean Boulevard , R2C5,</u> <u>Palm Beach, Florida 33480</u>	Address:	<u>2580 S. Ocean Boulevard , R2C5</u> <u>Palm Beach, Florida 33480</u>

Name and Title:	<u>Maria K. Modlin, Secretary</u>	Name and Title:	_____
Address	<u>2580 S. Ocean Boulevard , R2C5</u> <u>Palm Beach, Florida 33480</u>	Address:	_____

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

STATE OF FLORIDA
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
JUN 11 2009 1:09 PM

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: PLATINUM AGENT SERVICES LLC
 Address: 155 OFFICE PLAZA DR
TALLAHASSE, FL 32301

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Irvin M. Modlin President
 Address: 2580 S. Ocean Boulevard , R2C5
Palm Beach, Florida 33480

15 DEC -4 PM 1:09
 SECRETARY OF STATE
 PALM BEACH, 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.)

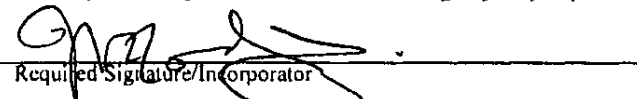
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


 Required Signature/Registered Agent

11/25/15
 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.


 Required Signature/Incorporator

12/03/15
 Date