

PI6 000038690

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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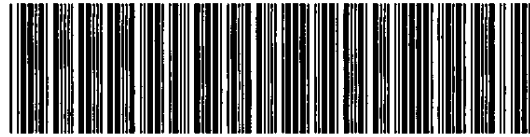
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: Kendall Consulting Corporation

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Randee S. Schatz, Esquire

Name (Printed or typed)

220 Sunrise Avenue Suite 209

Address

Palm Beach, Florida 33480

City, State & Zip

561-833-1846

Daytime Telephone number

rsschatz@comcast.net

E-mail address: (to be used for future annual report notification)

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

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: Kendall Consulting Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14224 Cypress Island Circle

Palm Beach Gardens, Florida 33410

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carol Farley, President and Director

Address: 14334 Cypress Island Circle
Palm Beach Gardens, Florida 33410

Name and Title: Edward J. Farley, Director

Address: 14334 Cypress Island Circle
Palm Beach Gardens, Florida 33410

Name and Title: Raelyn Farley, Director

Address: 14334 Cypress Island Circle
Palm Beach Gardens, Florida 33410

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

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: Randee S. Schatz
Address: 220 Sunrise Avenue Suite 209
Palm Beach, Florida 33480

ARTICLE VII INCORPORATOR

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

Name: Randee S. Schatz
Address: 220 Sunrise Avenue Suite 209
Palm Beach, Florida 33480

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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

Randee Schatz
Required Signature/Registered Agent

April 22, 2016
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.

Randee Schatz
Required Signature/Incorporator

April 22, 2016
Date