

# P/6000062592

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(Requestor's Name)

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■ MEMBER NJ BAR  
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▼ MEMBER MD BAR  
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▲ MEMBER MA BAR  
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July 20, 2016

*Via Overnight Delivery*  
Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

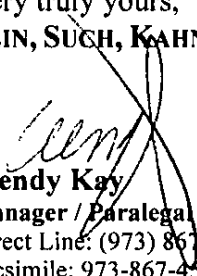
Re: Formation of Fairway Pointe Consulting, Inc.  
Our File No: S351-15

Dear Sir or Madam:

Enclosed please find an original and copy of the Articles of Incorporation of Fairway Pointe Consulting, Inc., along with our firm's check in the amount of \$87.50. Kindly expedite filing of same and forward the Certified Copy of the filed Articles of Incorporation and the Certificate of Status to my attention in the enclosed prepaid Federal Express Envelope (with completed shipping label).

Your prompt attention to this matter is greatly appreciated.

Very truly yours,  
**FEIN, SUCH, KAHN & SHEPARD, P.C.**

  
**Wendy Kay**  
Manager / Paralegal - Corporate, Trusts and Estates  
Direct Line: (973) 867-4536 (E-mail: [wkay@feinsuch.com](mailto:wkay@feinsuch.com))  
Facsimile: 973-867-4555  
Enclosures

## COVER LETTER

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

**SUBJECT:** FAIRWAY POINTE CONSULTING, INC.  
(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Wendy Kay, Paralegal  
Name (Printed or typed)

Fein, Such, Kahn & Shepard - 7 Century Drive - Suite 201  
Address

Parsippany, New Jersey 07054  
City, State & Zip

973-867-4536  
Daytime Telephone number

suchfun4@gmail.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**

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

**ARTICLE I NAME**

The name of the corporation shall be: FAIRWAY POINTE CONSULTING, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2576 NW 63rd Street

Boca Raton, Florida 33496

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Consulting Services

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title: Alan F. Such, President

Name and Title: \_\_\_\_\_

Address

2576 NW 63rd Street

Address: \_\_\_\_\_

Boca Raton, Florida 33496

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address

Address: \_\_\_\_\_

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: Alan F. Such  
Address: 2576 NW 63rd Street  
Boca Raton, Florida 33496

**ARTICLE VII INCORPORATOR**

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

Name: Alan F. Such  
Address: 2576 NW 63rd Street  
Boca Raton, Florida 33496

**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.)

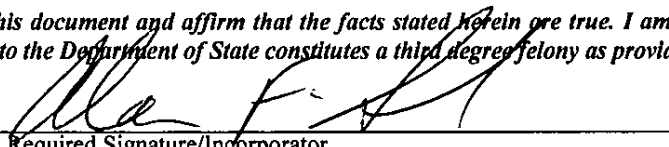
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

x   
Required Signature/Registered Agent

July 20, 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.*

x   
Required Signature/Incorporator

July 20, 2016  
Date

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