

P240000/4464

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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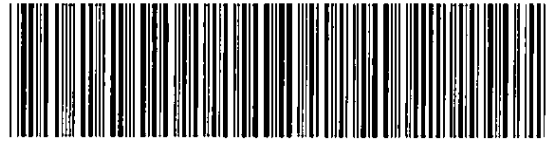
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
CLERK

COVER LETTER

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

SUBJECT: LJH CONSULTANTS, INC. - CORP DOMESTICATION

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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From: LAWRENCE HOFFMAN

Name (printed or typed)

4924 PEACEABLE WAY

Address

SARASOTA, FL 34242

City, State & Zip

941-320-4694

Daytime Telephone Number

LARRYJH@GMAIL.COM

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

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STATE
OF FLORIDA

Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, LAWRENCE HOFFMAN PRESIDENT
(Name) (Title)

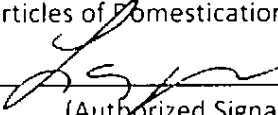
of LJH CONSULTANTS, INC. FSS000004075, a foreign
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of
Domestication.

1. Then name of the domesticating corporation is LJH CONSULTANTS, INC.
(Foreign Corporation)

2. The jurisdiction and date of its formation is IL - 05/25/1999
3. The name of the domesticated corporation is LJH CONSULTANTS, INC.

4. The jurisdiction of formation of the domesticated corporation is **Florida**
5. The domestication corporation is a foreign corporation and the domestication was
approved in accordance with its organic law.
6. Attached are Florida Articles of Incorporation to complete the domestication
requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.



(Authorized Signature)

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STATE
OFFICE

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

LJH CONSULTANTS, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

4924 PEACEABLE WAY

SARASOTA, FL 34242

Mailing Address

4924 PEACEABLE WAY

SARASOTA, FL 34242

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

GENERAL BUSINESS CONSULTING, PRINT PUBLISHING, AND DIGITAL PUBLISHING

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

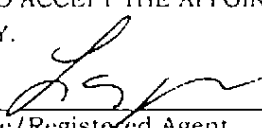
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

LAWRENCE HOFFMAN

4924 PEACEABLE WAY

SARASOTA, FL 34242

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.


Signature/Registered Agent

02/26/24
Date

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ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Name & Title: LAWRENCE HOFFMAN - PRESIDENT

Address: 4924 PEACEABLE WAY
SARASOTA, FL 34242

Name & Title: _____

Address: _____

Name & Title: LAWRENCE HOFFMAN - DIRECTOR

Address: 4924 PEACEABLE WAY
SARASOTA, FL 34242

Name & Title: _____

Address: _____

Name & Title: LAWRENCE HOFFMAN - CHAIRMAN

Address: 4924 PEACEABLE WAY
SARASOTA, FL 34242

Name & Title: _____

Address: _____

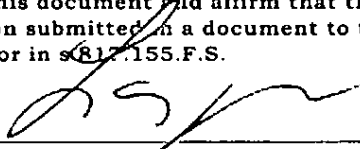
Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

I submit this document and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s817.155.F.S.



Signature/Authorized Person

2/26/24

Date

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On Thursday, January 18, 2024, I spoke with Victoria in the Florida Division of Corporations. She suggested that I include this additional information with my Form INHS53 (Articles of Domestication).

- LJH Consultants, Ltd. was established on May 25, 1999, as a Subchapter S corporation under FEIN 36-4299938.

Thank You

– Lawrence Hoffman

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STATE
OF FL