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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : RICHARDS & PARTNERS, P.A.
Account Number : I20110000091
Phone : (305)858-9900
Fax Number : (305)285-0015

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

Email Address: admin@worldcorporate.com

RECEIVED
2024 JUN 25 PM 4:32

FLORIDA PROFIT/NON PROFIT CORPORATION
A2C Consulting Corp

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Corporate Filing Menu

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COVER LETTER

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

SUBJECT: A2C CONSULTING CORP**(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

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED**FROM:** RICHARDS & PARTNERS, PA

Name (Printed or typed)

2665 S Bayshore Dr, Suite 703,

Address

Miami, FL, 33133

City, State & Zip

305-858-9900

Daytime Telephone number

admin@worldcorporateservices.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 NAMEThe name of the corporation shall be: A2C CONSULTING CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address2665 S Bayshore Dr, Suite 703, Miami, FL, 33133

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: Any and all lawful business**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Brendan Welsh, Director

Name and Title:

Address 2665 S Bayshore Dr, Suite 703,

Address:

Miami, FL, 33133

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 AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: WORLD CORPORATE SERVICES, INC.
Address: 2665 S Bayshore Dr, Suite 703,
Miami, FL, 33133

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: WORLD CORPORATE SERVICES, INC.
Address: 2665 S Bayshore Dr, Suite 703,
Miami, FL, 33133

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 days prior or 90 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

6-25-24
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

6-25-24
Date