

To:
1/2/25, 8:00 PM

Page 2 of 4

2025-01-02 14:02:23 PST

License

From: Amanda Frangione

P2500000253

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H25000002396 3)))



H250000023963ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : RASI S
Account Number : 120040000031
Phone : (800)906-9220
Fax Number : (800)906-9880

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2025 JAN -3 PM 4:41

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
UNDER THE OAK CONSULTING INC.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

RECEIVED

2025 JAN -3 AM 8:04

SECRETARY OF STATE
TALLAHASSEE, FL

T. BURCH

772

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: UNDER THE OAK CONSULTING INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

726 DATE PALM RDVERO BEACH, FL 32963**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: BUSINESS CONSULTING & ANY LAWFUL ACTIVITY**ARTICLE IV SHARES**The number of shares of stock is: 200 SHARES NPV**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: FRANCES LAWRENCE, PRESIDENT

Name and Title: _____

Address: 726 DATE PALM RD

Address: _____

VERO BEACH, FL 32963

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 2024 JAN -3 PM 4:41

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: FRANCES LAWRENCE
Address: 726 DATE PALM RD
VERO BEACH, FL 32963

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2024 JAN -3 PM 4:41

ARTICLE VII INCORPORATOR

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

Name: FRANCES LAWRENCE
Address: 726 DATE PALM RD
VERO BEACH, FL 32963

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

/s/ FRANCES LAWRENCE 12/24/2024
Required Signature/Registered Agent 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.

/s/ FRANCES LAWRENCE 12/24/2024
Required Signature/Incorporator Date