2/10/2021

P21000012340

Division of Corporations

# 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.

(((H21000058162 3)))

H21000058162 3ABCZ

**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 : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

**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
### Defending the Republic PAC Inc.

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

2021 FEB 11 AM 8:21

21 FEB 11 PM 7:01

Electronic Filing Menu Corporate Filing Menu Help

D O'KEEFE
FEB 12 2021

# 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: Defending the Republic PAC Inc.

***ARTICLE II PRINCIPAL OFFICE***

| Principal **street** address | Mailing address, if different is. |
|---|---|
| 10130 Northlake Blvd. #214-342 | |
| West Palm Beach, Florida, 33412 | |

***ARTICLE III PURPOSE***

The purpose for which the corporation is organized is: The corporation is an independent expenditure committee.

***ARTICLE IV SHARES***

The number of shares of stock is: 100

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

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

21 FEB 11 PM 7:10

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: C T Corporation System

Address: 1200 South Pine Island Road

Plantation, FL 33324.

21 FEB 11 PM 7:01

***ARTICLE VII INCORPORATOR***

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

Name: Peter Haller

Address: 10130 Northlake Blvd #214-342

West Palm Beach, Florida, 33412

***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***

By: C T Corporation System Kimberly Laughrey, Assistant Secretary 02/10/2021

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.***

Peter Haller 2/10/2021

Required Signature/Incorporator Date