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Special Instructions to Filing Officer:			
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W14-12363



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SECRETARY OF STATE
ALL MHASSEE FLORIDA

N 03/11/14



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 25, 2014

JEFFREY RAUSCH 2308 NE 2ND ST. POMPANO BEACH, FL 33062

SUBJECT: JEWISH PROFESSIONAL NETWORKING GROUP, 1 N C

Ref. Number: W14000012363

14 MAR 10 AN ID: 55

We have received your document for JEWISH PROFESSIONAL NETWORKING GROUP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 014A00004225

## **COVER LETTER**

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

SUBJECT:\ EWISH	PROFESSIONA	· NETWORKING	Group	(JPNG)
(PR	OPOSED CORPORATE NAI	ME – <u>MUST INCLUDE SUFFIX</u> )	<u> </u>	•

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

Filing Fee Filing Fee & Certificate of Status

\$78.75
Filing Fee & Filing Fee,
Certificate of Status

\$78.75
Filing Fee & Filing Fee,
& Certified Copy
Status

\$87.50
Filing Fee
Certified Copy
& Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: JERMY RAUSCH
Name (Printed or typed)

2308 NF 2nd ST.

Address

BEACH PL 33062

City, State & Zip

954-336-4606

Daytime Telephone number

INFO WIPNG. OFG.
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 617, F.S., (Not for Profit)

e name of the corporation shall be: VEWISH PROFES.		
Principal street address:	Mailing address, if different is:	$\wedge$
2308 NF 2ND ST.	<del>-</del>	1
Pompano BEACH, FL 3300	62	ADDING
	)	INC. AT
TICLE III PURPOSE	Comment Britage &	WC(ECW
purpose for which the corporation is organized is: Fon Vo	DIRATION (SOVO) - 0	nout"
TO PROVIDE GOOD TO LOCAL SHI	ULS, TEMPLES, RARRI'S Y	ISRAFL CA
RZORMEN AT THE HIGHEST LEVE		
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Name and Title:	Name and Title:	· · · · · · · · · · · · · · · · · · ·
Address	Address:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Bo	ox NOT acceptable) of the registered agent is:	
Name: EMPLY KADS	200 ST. ACH, PL 33062	
Address: 2308 NE	2ro 57.	TAL SEC
fom pane Be	ACH, PL 33062	F III
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:		
	JUSCA	
Address: 2308 NF dr	101M 10 ST. 1ACH, PL 33062	RIDA
forpare be	ACH, PL 33062	
Having been named as registered agent to accertificate, I and familiar with and accept the a	ccept service of process for the above stated corpor pointment as registered agent and agree to act in t	ration at the place designated in this his capacity
Required Signature	of Registered Agent	Date
I submit this document and affirm that the for to the Department of State constitutes a third of	ts stated herein are true. I am aware that any false legree felony as provided for in s.817.155, F.S.	information submitted in a document
Required Signa	ature of Incorporator	Date