

N22000008867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

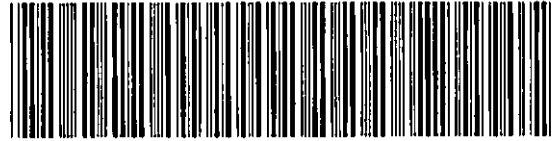
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. CHATHAM
AUG - 3 2022

RECEIVED
2022 AUG - 2 PM 4:17
TALLAHASSEE, FLORIDA

22 AUG - 2 PM 3:00

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE use funds from ACCT: I20210000160 AMOUNT: \$ 70.00

Authorization Signature: James Gull

The TAR Network Inc.

Business

Document #

☐ Walk in ☐ Pick up time

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certified Copy (s) of Articles of Incorporation

☐ Certificate of Status

NEW FILINGS

☐ Profit
☒ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other
☐ **CORP**

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name
☐ APOSTIL () ☐ Country

AMMENDMENTS

☐ Amendment
☐ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ Disolution/Withdrawal
☐ Merger
☐ **Conversion**

REGISTRATION/QUALIFICATIONS

☐ Foreign filing
☐ Limited Partnership
☐ Reinstatement
☐ Other

22 AUG -2 PM 3:37

EXAMINER'S INITIALS: _____

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TALLAHASSEE, FL 32309
(850) 524-5437
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☐ Other

EXAMINER'S INITIALS: _____

22 AUG -2 PM 3:37

COVER LETTER

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

SUBJECT: The TAR Network, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Keith Diamond

Name (Printed or typed)

3440 Hollywood Blvd, Suite 415

Address

Hollywood, Florida 33021

City, State & Zip

954-618-1008

Daytime Telephone number

Keithdiamond2@aol.com

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

NOTE: Please provide the original and one copy of the articles.

22 AUG -2 FH 3:37

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: The TAR Network, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
411 N. New River Drive East

Condo 904

Fort Lauderdale, Florida 33301

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Education treatment and resources for those impacted by toxic abusive relat

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: By Vote of Majority.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dr. James Huysman, President

Name and Title: _____

Address 411 N. New River Drive

Address: _____

Condo 904

Fort Lauderdale, Fl 33301

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

22 AUG -2 PM 3:44

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Keith Diamond

Address: 3440 Hollywood Blvd, Suite 415

Hollywood, FL 33021

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Keith Diamond

Address: 3440 Hollywood Blvd

Hollywood, FL 33021

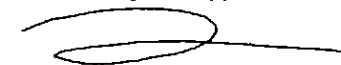
ARTICLE VIII EFFECTIVE DATE:

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 of Registered Agent

08/02/2022

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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 of Incorporator

08/02/2022

Date