

211000019958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

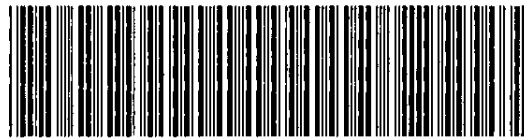
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2011 FEB 25 PM 12:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers MAR 01 2011

## COVER LETTER

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

SUBJECT: Peaceful Beach Mediation & Collaboration, Inc.  
(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 Filing Fee  
☐ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: Brooke Goldfarb  
Name (Printed or typed)

320 Deland Avenue  
Address

Indianapolis, IN 46203  
City, State & Zip

321.626.2858  
Daytime Telephone number

peacebeachbrooke@yahoo.com  
E-mail address: (to be used for future annual report notification)

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

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SECRETARY OF STATE

ARTICLES OF INCORPORATION

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

**ARTICLE I NAME**

Peaceful Beach Mediation & Collaboration, Inc.

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
320 Deland Avenue  
Indialantic, Florida 32903

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Provide mediation and collaboration services.

**ARTICLE IV SHARES** 1000

The number of shares of stock is:

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

Name and Title: Brooke Goldfarb, President  
Address: 320 Deland Avenue  
Indialantic, FL 32903

Name and Title: Brooke Goldfarb, Treasurer  
Address: 320 Deland Avenue  
Indialantic, FL 32903

Name and Title: Loren Goldfarb, Secretary  
Address: 320 Deland Avenue  
Indialantic, FL 32903

Name and Title: Brooke Goldfarb, Director  
Address: 320 Deland Avenue  
Indialantic, FL 32903

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Brooke Goldfarb  
Address: 320 Deland Avenue  
Indialantic, FL 32903

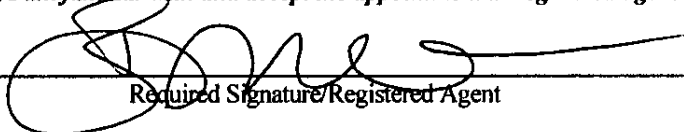
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Brooke Goldfarb  
Address: 320 Deland Avenue  
Indialantic, FL 32903

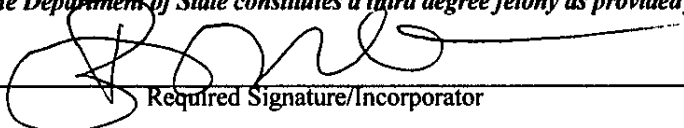
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
Required Signature/Registered Agent

2-23-2011  
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

2-23-2011  
Date