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COVER LETTER

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

SUBJECT: FLOOD ZONE CONSULTANTS 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: KIMBERLY PINNELL

Name (Printed or typed)

7111 NW 48TH WAY

Address

COOCNUT CREEK FLORIDA 33073

City, State & Zip

877-300-9145

Daytime Telephone number

PATTI@FLOODZC.COM

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

ARTICLE I NAME FLOOD ZONE CONSULTANTS INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
7111 NW 48TH WAY
COCONUT CREEK FLORIDA 33073

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO RECLASSIFY FLOODZONES

ARTICLE IV SHARES

The number of shares of stock is: 1000 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PATRICIA TABRIS PRESIDENT
Address: 8640 NW 56TH STREET
CORAL SPRINGS FLORIDA 33067

Name and Title: KIMBERLY PINNELL VICE PRES.
Address: 7111 NW 48TH WAY
COCONUT CREEK FL 33073

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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:

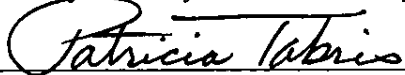
Name: PATRICIA TABRIS
Address: 8640 NW 56TH STREET
CORAL SPRINGS FLORIDA 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOHN A. JANUS
Address: 4590 NW 83RD LANE
CORAL SPRINGS FLORIDA 33065

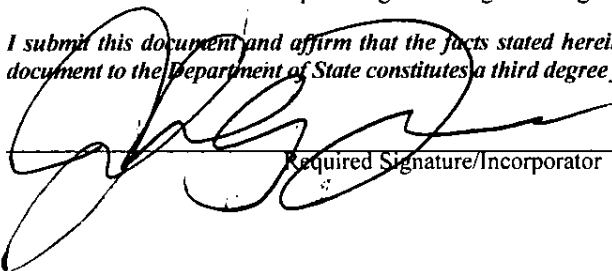
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

4/6/11
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

4/1/11
Date