

PIA 0000086812

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

COVER LETTER

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

SUBJECT: Florida's Best Public Adjusters, 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: Stephen Lippy
Name (Printed or typed)
6518 Timber Lane
Address
Boca Raton FL 33433
City, State & Zip
561 715 8986
Daytime Telephone number
StephenLippy@comcast.net
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

The name of the corporation shall be:

Florida's Best Public Adjusters, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

6518 Timber Lane
Boca Raton, FL 33433

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Insurance Services

ARTICLE IV SHARES

The number of shares of stock is:

6

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Stephen Lippy, Pres.

Address:

6518 Timber Lane
Boca Raton, FL 33433

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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ARTICLE VI REGISTERED AGENT

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

Name:

Stephen Lippy

Address:

6518 Timber Lane, Boca Raton FL 33433

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Sandra Lippy

Address:

6518 Timber Lane
Boca Raton FL 33433

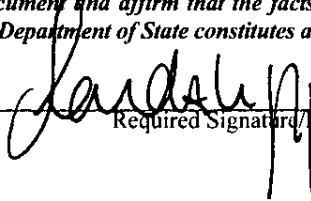
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature Registered Agent

10/8/12
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

10/8/12
Date