

P/40000079729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

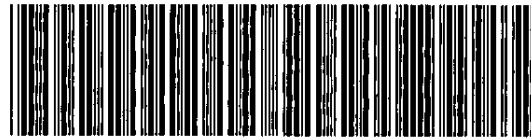
(Business Entity Name)

(Document Number)

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

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APPROVAL  
AND  
FILED  
14 SEP 25 PM 2:37  
STATE OF NEW YORK  
TALLMAN COUNTY

1/4

## COVER LETTER

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

SUBJECT: **Plan BFF, Co.**

(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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: **Tiffani Spivak**

Name (Printed or typed)

**3308 SE 5th St., Apt 2**

Address

**Pompano Beach, FL. 33062**

City, State & Zip

**954-226-1859**

Daytime Telephone number

**planbff@gmail.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)

APPROVAL  
AND  
FILED

**ARTICLE I NAME**

The name of the corporation shall be: Plan BFF, Co.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1404 Bayview Dr.  
Ste. 323  
Ft. Lauderdale, FL 33304

SECURITY  
Mailing address, if different is: FL 33062

3308 SE 5th St  
Apt 2  
Pompano Beach, FL 33062

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To provide concierge service for South Florida  
for visitors, tourists, convention attendees/vendors, and/or any person or  
business that may require said service. Said service will include, but not limited to  
organizing and executing accomodation reservations, transportation services,  
dining and entertainment reservations and recommendations, maritime charters,  
and a variety of city tours and local information etc.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Tiffani Spivak, Director

Address: 3308 SE 5th St.

Apt. 2

Pompano Beach, FL. 33062

Name and Title: J. Shawne Webster, Director

Address: 1010 NE 16th St.

Apt. 1

Ft. Lauderdale, FL 33304

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_

APPROVED (cont.)  
AND  
FILED

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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:

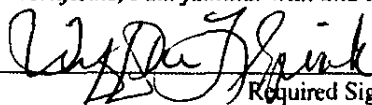
Name: Tiffani Spivak  
Address: 3308 SE 5th St., Apt 2  
Pompano Beach, FL 33062

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Name: Tiffani Spivak  
Address: 3308 Se 5th St., Apt. 2  
Pompano Beach, FL.33062

*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

09/22/14  
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

09/22/14  
Date