

P15000063145

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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~~W15 4/6/2016~~

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2015 JUL 27 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 28 2015

~~W15 4/6/2016~~

COVER LETTER

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

SUBJECT: The Best of the Palm Beach County 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: Jerry Lower
Name (Printed or typed)

2 Harbour Drive North
Address

Ocean Ridge FL 33435
City, State & Zip

561-313-9195
Daytime Telephone number

publisher@the coastal star.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 9, 2015

JERRY LOWER
2 HARBOUR DRIVE NORTH
OCEAN RIDGE, FL 33435

SUBJECT: THE BEST OF THE PALM BEACHES
Ref. Number: W15000046266

We have received your document for THE BEST OF THE PALM BEACHES and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Teresa Brown
Regulatory Specialist II


Letter Number: 015A00014352

Thank you for the chance to get the name correct
We would like to use

The Best of Palm Beach County Inc.

for the company name

Jerry Lower



7-20-15

The Best of Palm Beach County Inc.

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: The Best of the Palm Beaches

ARTICLE II PRINCIPAL OFFICE

Principal street address

5114 N Ocean

Ocean Ridge FL

~~33435~~ 33435

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all legal enterprise

FILED
2015 JUL 27 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DEBORA A. YAGER

Title
Name and Title: PUBLISHER & PRESIDENT

Address

4069 STREAMAIRE LN.

Address:

BOYNTON BCH., FL.

33435

Name and Title:

Christine L. Belland

Name and Title:

Advertising Director &

Address

1209 Sandaway Lane

Address:

Vice-President

Delray Beach, FL 33483

Name and Title:

Jerry Lower

Name and Title:

Business Manager

Address

2 Harbor Drive North

Address:

Ocean Ridge FL

33435

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: Jerry Lower

Address: 2 Harbour Drive North
Ocean Ridge FL 33435

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SAME

Address: _____

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 7-1-15 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business 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.

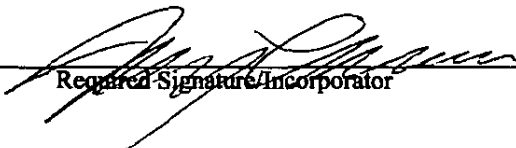
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

7-1-15
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

7-1-15
Date

Adjusted to
new name
on 7/16/15