

P16000092020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

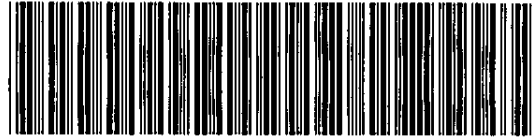
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400290618234

09/27/16--01032--008 \*\*70.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2016 NOV 17 PM 2:15

W16-066711

11/18/16



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

16 NOV 17 PM 12:01

Division of Corporations  
INFORMATION SERVICES

September 28, 2016

MARNEE SCHNEIDER  
3237 N.W. 62ND ST.  
BOCA RATON, FL 33496

SUBJECT: SAFETY FIRST, INC  
Ref. Number: W16000066711

We have received your document for SAFETY FIRST, INC 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 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.

The document number of the name conflict is L08000117882.

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.

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of 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.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 816A00020807

## COVER LETTER

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

SUBJECT: PREVENTCORE, INCORPORATED  
(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

*Previously  
sent*

FROM: Stephen Firestone  
Name (Printed or typed)

3237 NW 62nd St  
Address

Boca Raton, FL 33496  
City, State & Zip

561 - 271 2385  
Daytime Telephone number

Steve Firestone@aol.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

The name of the corporation shall be: PRENTCORE, INCORPORATED

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3237 NW 62nd ST

BOCA RATON, FL 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: vehicle maintenance

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEPHEN FIRESTONE, PRES Name and Title:

Address: 3237 NW 62nd ST Address:

BOCA RATON, FL 33496

Name and Title: Name and Title:

Address: Address:

Name and Title: Name and Title:

Address: Address:

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2016 NOV 17 PM 2:15

Name and Title: STEPHEN FIRESTONE, PRES Name and Title: \_\_\_\_\_

Address 3237 NW 62<sup>nd</sup> ST Address: \_\_\_\_\_  
BOCA RATON, FL 33496 \_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: STEPHEN FIRESTONE  
Address: 3237 NW 62<sup>nd</sup> ST  
BOCA RATON, FL 33496

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: STEPHEN FIRESTONE  
Address: 3237 NW 62<sup>nd</sup> ST  
BOCA RATON, FL 33496

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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 11/14/16  
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 11/14/16  
Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2016 NOV 17 PM 2:15