

8/17/2017

Division of Corporations

PN00069568

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**Priderock Associates, Inc.**

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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ALLAHASSEE, FLORIDA

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Corporate Filing Menu

Help

AUG 18 2017

K. Brumbley

**COVER LETTER**

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

**SUBJECT:** Priderock Associates, 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:** Kathleen Swencki

Name (Printed or typed)

525 Okeechobee Blvd., Suite 1650

Address

West Palm Beach, FL 33401

City, State & Zip

561-653-9332

Daytime Telephone number

kswencki@prcpilc.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: Priderock Associates, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
525 Okeechobee Blvd., Suite 1650  
West Palm Beach, FL 33401

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To engage in any lawful act or activity for which corporation may be  
incorporated in the state of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title: George W. Banks, Director

Address: 525 Okeechobee Blvd., Suite 1650  
West Palm Beach, FL 33401

Name and Title: David N. Khoury, Director

Address: 525 Okeechobee Blvd., Suite 1650  
West Palm Beach, FL 33401

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

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

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

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

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

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

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

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: C T Corporation System

Address: 1200 South Pine Island Road

Plantation, FL 33324

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Kathleen Swencki

Address: 525 Okeechobee Blvd., Suite 1650

West Palm Beach, FL 33401

**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:*

By: C T Corporation System James M. Halpin 8/17/2017

Required Signature/Registered Agent Assistant Secretary 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.*

Kathleen Swencki 8.17.17

Required Signature/Incorporator Date