

P200000084330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

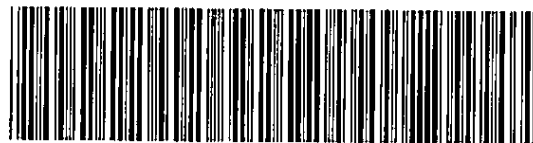
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: FAMILY TALK CORPORATION
(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

CHECK
ENCLOSED

FROM: SUSAN BERTAUX
Name (Printed or typed)
19 Pine Arbor LANE #105
~~19 Pine Arbor Lane #105~~
Address
Vero Beach, Florida 32965
City, State & Zip
772-569-2141
Daytime Telephone number
ONEJAZZYADY@AOL.COM
E-mail address: (to be used for future annual report notification)

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

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FILE
10/15/20

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: FAMILY TALK CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

19 PINE ARBOR LANE #105
VERO BEACH, FL 32962

P.O. Box 650011
VERO BEACH, FLORIDA 32965

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRAVEL, EXPLORATION, COOKING, FINE DINING
REVIEWING RESORTS & LODGES
TYPE OF TRAVEL AVAILABLE TO CONSUMERS
HOME COOKING, SHOPPING
PROVIDING REVIEWS TO CONSUMERS OF ALL
TRAVEL, LODGING, ~~EATING~~
EATING, AND ENTERTAINMENT,

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SUSAN BERTAUX Name and Title: _____

Address: 19 PINE ARBOR LANE #105 Address: _____
VERO BEACH, FL 32962

Name and Title: N/A Name and Title: _____

Address: _____ Address: _____

Name and Title: N/A Name and Title: _____

Address: _____ Address: _____

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STATE
OFFICE

Name and Title: N/A 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: SUSAN BERTAUX
Address: 19 PINE ARBOR LANE #105
VERO BEACH, FL 32962

ARTICLE VII INCORPORATOR

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

Name: SUSAN BERTAUX
Address: 19 PINE ARBOR LANE #105
VERO BEACH, FL 32962

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10-13-2020 ~~5-1-2020~~ (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

SUSAN BERTAUX

Required Signature/Registered Agent

10-13-2020

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.

Susan Bertaux

Required Signature/Incorporator

Date

10-13-2020
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