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Florida Department of State
Division of Corporations
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: KD@CohenNorris.com

FLORIDA PROFIT/NON PROFIT CORPORATION FAN Consulting, Inc.

Certificate of Status	0
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Corporate Filing Menu

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COVER LETTER

T410003725963

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

SUBJECT: FAN Consulting, 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 ☐ \$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: Gregory R. Cohen, Esq.

Name (Printed or typed)

Cohen Norris Wolmer Ray Telepman Berkowitz Cohen

Address

712 U.S. Highway One, Suite 400, North Palm Beach, FL 33408

City, State & Zip

561-844-3600

Daytime Telephone number

KD@COHENNORRIS.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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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: FAN Consulting, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

260-A Business Parkway

Royal Palm Beach, FL 33411

Mailing address, if different is:

610 Clematis Street #706

West Palm Beach, FL 33401

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Frederick Allan Nichols, Pres./Dir.

Name and Title: _____

Address 260-A Business Parkway

Address: _____

Royal Palm Beach, FL 33411

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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CLERK OF STATE
CORPORATE SERVICES

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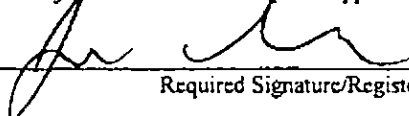
Name and Title: _____ Name and Title: _____

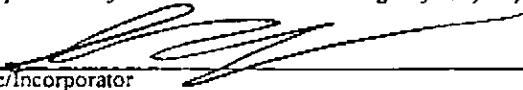
Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: Cohen Norris Wolmer Ray Telepman Berkowitz CohenAddress: 712 U.S. Highway One, Suite 400North Palm Beach, FL 33408**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: Gregory R. Cohen, Esq.Address: 712 U.S. Highway One, Suite 400North Palm Beach, FL 33408**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 Agent10-4-2021
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/Incorporator10-5-2021
Date