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(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
 -			

Office Use Only



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COVER LETTER

January 26, 2022

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

SUBJECT:	Florida Executive Business Advisors, Inc.			
-	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	本\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REOUIRED	
FROM:	Patricia A. Pinker			
	Name (Printed or typed)			
	209 Sigma Drive			
	Address			
	Pittsburgh, PA 15238			
	City, State & Zip			
	(412) 963-0700 x10140			
	Daytime Telephone number			
	ppinker@chclp.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)

RTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address 10993 Jack Nicklaus Drive	Mailing address, if different is:
North Palm Beach, FL 33408	
RTICLE III PURPOSE	
the purpose for which the corporation is organized in	s: Any and all lawful business.
	22 JAN 2
	19 '''
	9.
	<u> </u>
	80
RTICLE IV SHARES he number of shares of stock is: 100	PECTORS
he number of shares of stock is: 100 RTICLE V INITIAL OFFICERS AND/OR DIR	RECTORS Name and Title:
he number of shares of stock is: 100 RTICLE V INITIAL OFFICERS AND/OR DIR Name and Title:	Name and Title:
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Name and	Title:	Name and Title:
Address		Address:
	EGISTERED AGENT orida street address (P.O. Box NOT acceptable) o	of the registered agent is:
Name:	Richard A. Graciano, Jr.	
Address:	10993 Jack Nicklaus Drive	
	North Palm Beach, FL 33408	-
ARTICLE VII I	NCORPORATOR .	
The name and add	dress of the Incorporator is:	
Name:	Patricia A. Pinker	_
Address:	209 Sigma Drive	
	Pittsburgh, PA 15238	_
Effective date, if c (If an effective da filing.) Note: If the date:	ate is listed, the date must be specific and cann	(OPTIONAL) not be more than five days prior or 90 days after the le statutory filing requirements, this date will not be listed a s.
	ed as registered agent to accept service of process miliar with and accept the appointment as registed. July 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	for the above stated corporation at the place designated in the ered agent and agree to act in this capacity Date
	ment and affirm that the facts stated herein are expartment of State constitutes a third degree felo.	re true. I am aware that the false information submitted in ony as provided for in s.817.155, F.S.
Required Signatur	re/Incorporator	Date

Patricia A. Pinker