P23000073690

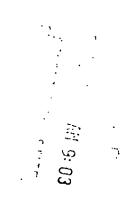
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
,				
(Document Number)				
(,				
Certified Copies Certificates of Status				
Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



900416769839

10/06/23--01028--012 +*78.75



COVER LETTER

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

٠.

SUBJECT: _ Pa	Im Coust Profess (PROPOSED CORPORAT	FENAME-MUST INCL	less Network Inc.									
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 & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status									
		ADDITIONAL CO)PY REQUIRED									
FROM: Rachel Vele T Name (Printed or typed)												
Palm (oest FL 32164 City, State & Zip Log - 805 - 2055 Daytime Telephone number												
							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 corpora	tion shall be: Palm Coast	Profession	rul & Business,	Network Inc
ARTICLE II PRINC	Principal street address		Mailing address, if differ	rent is:
- 7-34 W	Diano Versek	_	PO BOX 350	885
	Coast FL 32164		Palm Coust	FL 32135
ARTICLE III PURP	the corporation is organized is:	procuring	leads for	
our me	embers in small	business	es and com	munity
Service				
37.87.11				
				~
	f stock is: None AL OFFICERS AND/OR DIRECTOR 1e: Brad Ward Director	<u>25</u>	1 Title (24) 19 5	5mith-Trans
	35 BrenMar Lane		,	
	Palm Coast Fl 32137		Palm Coas	
Name and Title	Diana M Versela S.	ecretery Name an	Title: DR TOSH (NRIHHT INCEMI
Address	34 Woodhalme Ln	Address:	21 OLD KI	NUS RO N.O.
	Diara MVersele S. 34 Woodholme Ln Palm Coast, FL 3016	4_	PACM COB	5r, FL, 32437
Name and Title	5731 JOHN ALMA FLAGUR BOACH F	Name an	HTitle: MKHAEL	ZEEFF MEMBER
Address /	5731 JOHN ALXI	25~ Address:	1 HARGRAE	UPLOE STE3
	FLAGUR BOACH H	~Y. (} ()	PARM LOF	F KL 32137

Name and Title:_		Name and Title:	
Address _		_ Address:	
_		_	
-		-	
ARTICLE VI REGIST The name and Florida st	<u>TERED AGENT</u> : <u>reet address</u> (P.O. Box NOT acceptable) o	f the registered age	nt is:
Name:	Rachel Velez		
Address:	94 Whippoorwill	Nive	
Address.	Pain Coast	_ J) / / · ¥
	rum (0451		27 6 7
ARTICLE VII INCOR	PORATOR		
The name and address o	f the Incorporator is:		
Name:	Brad Ward	_	
Address:	35 Bren Mar Lane		
	Palm Coast FL 32	- 137	
	Cody 1		
ARTICLE VIII EFFE	CTIVE DATE:		
Effective date, if other th	nan the date of filing:	(O) ot be more than f	PTIONAL) ive days prior or 90 days after the
filing.)	,		
	d in this block does not meet the applicable		equirements, this date will not be listed as
the document's effective	date on the Department of State's records		
			d corporation at the place designated in this
certificate, I am familiar	with and accept the appointment as registe	red agent and agre	ee to act in this capacity
T	Ruchel Velz		9/28/2023
	Required Signature/Registered Age		Date
			that the false information submitted in a
aocument to the Departm	nent of State constitutes a third degree felor	iy as provided for	10 0 01/1.155, F.S.
- The	v uncer		10-1-2025
Required Signature/Inco	rporator		Date

.

Palm Coast Professional & Business Network, Inc. PO Box 350885 Palm Coast, FL 32135

September 27, 2023

Florida Department of State Division of Corporations

Attn: New Filing Section

Attached is our New Filing for our Corporation. We have no intention of reinstating document #N19000010626. We are giving the state permission to release our name Palm Coast Professional & Business Network, Inc. for our new filing as we would like to use the same name.

Sincerely

Diana Versek Secretary