

P23 NOV 79283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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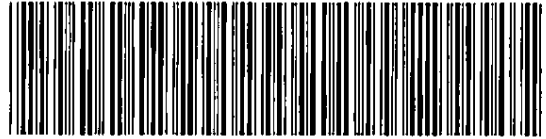
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2023 NOV -6 PM 12:34  
Clerk of Court, FL

## COVER LETTER

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

**SUBJECT:** BEACH LOAN SERVICES 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:** JOE BUSSEY

Name (Printed or typed)

8448 BORBONI CT

Address

NAPLES, FL 34114

City, State & Zip

(714) 657-8059

Daytime Telephone number

bussey73@yahoo.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: BEACH LOAN SERVICES INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

8448 BORBONI CT

NAPLES, FL 34114

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: any and all lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: JOE BUSSEY, PRESIDENT

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

Address 8448 BORBONI CT

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

NAPLES, FL 34114

Name and Title: JOE BUSSEY, TREASURER

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

Address 8448 BORBONI CT

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

NAPLES, FL 34114

Name and Title: JOE BUSSEY, SECRETARY

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

Address 8448 BORBONI CT

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

NAPLES, FL 34114

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2023 NOV - 6 P11:12:34  
CLERK OF THE  
COURT  
STATE OF 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: JOE BUSSEY  
Address: 8448 BORBONI CT  
NAPLES, FL 34114

**ARTICLE VII INCORPORATOR**

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

Name: JOE BUSSEY  
Address: 8448 BORBONI CT  
NAPLES, FL 34114


**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: January 1, 2024. (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 Agent

11-1-23  
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/Incorporator

11-1-23  
Date

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